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COVER LETTER

TO: Registration Section Division of Corporation		•	
SUBJECT: Alw	ays Event	ited LLC interpretation in the LLC interpret	
The enclosed Articles of Art	nendment and fee(s) are sub-	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
	Kristin	Name of Person	
	Always	S Eventful LL(Firm/Company	2
	536 NW	232rd Terrace Address	
	Newber	City/State and Zip Code	
-	E-mail address: (1	ancic@icloud. to be used for future annual report notific	Com
For further information conc	erning this matter, please ca	all:	
Krtstin Zu Name of Pe	pancic	at (407) 463-	3554 Telephone Number
Enclosed is a check for the f	following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Always Events (Name of the Limited Liability Compar (A Florida Limited L.)	y as it now appears of	n our records.)	
The Articles of Organization for this Limited Liability Company	were filed on <u>Felo</u>	mary 22, 2016	and assigned
Florida document number L 16 0000 36 094.		_	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here	:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the desig	gnation "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		en e	<u>ਰ</u>
		<u> </u>	.
B. If amending the registered agent and/or registered of		ur records, enter the	name of the new
registered agent and/or the new registered office address here	:	<u>기</u> 	<u>ښ</u>
Name of New Registered Agent:		<u> </u>	32
New Registered Office Address:			
	Enter Florida	street address	
	Cit.	, Florida	lip Code
New Registered Agent's Signature, if changing Registered Agent:	City		<i>пр Сош</i> е
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my provided for in Cha	y duties, and I am fami apter 605, F.S. Or, if th	liar with and iis document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Dwner	Kristin Zupancic	536 NW 232Nd Terrace	Add
		536 NW 232Nd Terrace Newberry, FL 32669	☐ Remove
			Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			☐ Change
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effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of the effective date inserted in this block does not meet the applicable status ument's effective date on the Department of State's records.	(optional) filing or more than 90 days after filing.) Pursuant tory filing requirements, this date will not be	to 605.0 be listed
record specifies a delayed effective date, but not an effe he 90th day after the record is filed.	ective time, at 12:01 a.m. on the	earlier
ed March 28 , 2016.		
red March 28 , 2016. Rristin & Zupa Signature of a member or authorized repr	resentative of a member	
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Page 3 of 3

Filing Fee: \$25.00