116000038247

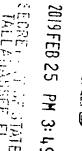
(Requestor's Name)				
, (Address)				
(A	ddress)			
(C	city/State/Zip/Phone #	/)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates o	f Status		
Special Instructions to Filing Officer:				
<u> </u>				





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R. WHITE FEB 2 8 2019

COVER LETTER

IO: Registration Se Division of Cor			
Turt Junkie	e, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Justo H. Gomez		
		Name of Person	
	Turf Junkie, LLC		
		Firm/Company	
	500 S Federal HWY, Suite	776	
		Address	
	Hallandale, FL 33009		
	Justo@TurfJunkic.com / Ju	City/State and Zip Code sto@SurrenderNot.com	
	E-mail address: (to be used for future annual report notifi-	cation)
For further information of	concerning this matter, please ca	all:	
Justo H. Gomez		954 494-0561	
Name c	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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:

. 1

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**

FILED

Turf Junkie, LLC

2019 FEB 25 PM 2: 31

(<u>Name of the Limited Liab</u> (A Flor	pility Compan rida Limited Li	y as it now appears on our ability Company)	records.)	STATE LFL
ne Articles of Organization for this Limited Liability orida document number L16000038247	/ Company v	were filed on February 2		nd assigned
nis amendment is submitted to amend the following:	:			
. If amending name, enter the new name of the li	mited liabil	lity company here:		
URRENDER NOT! LLC				
e new name must be distinguishable and contain the words "L	imited Liabilit	ly Company," the designation	on "LLC" or the abbreviat	ion "L.L.C."
nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		500 S Federal HWY, Suite 776		
		Hallandale, FL		
		33009		
nter new mailing address, if applicable: <u>Aailing address MAY BE A POST OFFICE BOX)</u>		500 S Federal HWY, St	uite <i>7</i> 76	
		Hallandale, FL		
		33009		
If amending the registered agent and/or registered agent and/or the new registered office action Name of New Registered Agent:	4	:	records, enter the r	name of th
5(Y)) S Federal H	WY, Suite 776		
New Registered Office Address:		Enter Florida stree	et address	
Hal	Handale		, Florida	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

f 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>	Name	<u>Address</u>	Type of Action
AMBR	Justo H. Gomez		
			□ Remove
-		500 S Federal HWY Suite 776, Hallandale, FL 33009	
			Add
			□ Remove
			Change
			□ Add
			Remove
		 	Change
			□ Remove
			Change
			D Add
			Remove
			□ Change
			□ Add
			☐ Remove
			☐ Change