## 4000040128

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
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SECRETARY OF STATE

D. SCOTT DEC 7 2016

## **COVER LETTER**

	ration Section n.of Corporation	ì	<b>e</b> -			
SUBJECT:	SOUTH	HORIDA Name of Limi	SIPS LL(	<u> </u>		
The enclosed Art	ticles of Amendme	ent and fee(s) are subn	nitted for filing.			
Please return all	correspondence co	oncerning this matter t	to the following:			
		Jesse Sourr 7	Name of Person  Tokida SIPS  Firm/Company	y III		
		2838 ( BALTIM	O'Donnell -	1224	SECRETARY OF TALLAHASSEE, F	FILED
PGC + CLL - The For further inform	mation concerning	E-mail address: (to	o be used for future annual report no	ENT. COM tification)	SEE, FLORIDA	1
Vesse	Name of Person	ulma-Itt	at (Ho) 982- Area Code Daytin	~//70 me Telephone Number		
Enclosed is a che	eck for the following	ng amount:				
□ \$25.00 Filing		00 Filing Fee & rtificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	

**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

South Florida	LIPC 11C	
(Name of the Limited Liability C	Company as it now appears on our rec	ords.)
The Articles of Organization for this Limited Liability Com Florida document number <u>L 160000 40728</u> .	,,,,,,,	/ 2016 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or register		ords, enter the name of the new
registered agent and/or the new registered office address	s nere:	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	dress
	Lamber a For Folke Oil OUR Miles	
	,	Florida Zip Code
New Pegistered Agent's Signature if changing Degistered A	aont:	

New Registered regent s organitates it enaughing registered regent.

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

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
MGR	Jesse T. Dowling II	180 Business Parkway	DAdd
		Surte B-2	□ Remove
		180 Business Parkway Surte B-2 Royal Palm Beach, FL 334	Change
			Add
			□ Remove
			Change
			Remove
			Change
			Add
			Remove SECOLLAR
			LED Refference
			Change
			Add
			Remove
			Change

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  (b) The 90th day after the record is filed.  Dated	D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing:  (If an effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to GA 0207 (3)(  Note:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will in the listed as the document's effective date on the Department of State's records.  If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  (b) The 90th day after the record is filed.		
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(1)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  (b) The 90th day after the record is filed.	•	
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Dated	Note:	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will be listed as the
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Signature of a member or authorized representative of a member	Dated	·································
Signature of a member or authorized representative of a member		lesse of the certainty
Torse To Markey TIP		Signature of a member or authorized representative of a member  Jesse T., Dowling III

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00