116000042098

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Ви	siness Entity Na	me)		
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



900284372849

FILING CANCELLED RETURNED CHECK

04/11/16--01035--003 **30.00

TILED
2016 APR 11 P 4: 48

HR 12 2016

COVER LETTER

DIVISION O	n Curporations	
Cornic	iche-America LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Article	les of Amendment and fee(s) are submitted for filing.	
Please return all cor	rrespondence concerning this matter to the following:	
	Erik B Sjoeborg	
	Name of Person	
	Corniche-America LLC	
	Firm/Company	
	7512 Dr Philips Blvd, Suite 50/735	
	Address	
	Orlando, FL 32819	
	City/State and Zip Code	
	baardie@gmx.com	
	E-mail address: (to be used for future annual report notification)	
For further informa	ation concerning this matter, please call:	201
Erik B Sjoeborg	321 5129880 English	2016 APRI
N	Name of Person Area Code Daytime Telephone Number	= [
Enclosed is a check	k for the following amount:	· -
□ \$25.00 Filing F	Certificate of Status Certified Copy Certificate of Certificate of Certified Copy is enclosed) Certified Co	of Status &

MAILING ADDRESS:

Registration Section

TO:

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

(Name of the Limited Liability Company as it now as (A Florida Limited Liability Company)	LC
(Name of the Limited Liability Company as it now at (A Florida Limited Liability Compa	opears on our records.) any)
The Articles of Organization for this Limited Liability Company were filed on	n 29 February 2016 and assigned
Florida document number L16000042098	
This amendment is submitted to amend the following:	FILING CANCELLED
A. If amending name, enter the new name of the limited liability compar	RETURNED CHECK
The new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
<u> </u>	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	ss on our records, enter the name of the new
Name of New Registered Agent:	SEX SEX
New Registered Office Address:	ARC APR
Ente	er Florida street address
	, Florida
City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

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

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

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
AMBR	Alex McCulloch	7512 Dr Philips Blvd,Suite 50/735,	
FILING CANCELLED	Orlando Florida 32819	Remove	
K	ETURNED CHECK		Change
			🗖 Add
			Remove
			☐ Change
			Remove
			Change
			☐ Remove
			Change Change Remove
			E Change
			Add
			Remove
			☐ Change

						<u> </u>	
	FILIN	G CANC	ELLED				<u></u>
	<u> </u>	RNED C					
<u> </u>	<u></u>						
	<u>. </u>			<u>-</u> -		···	
		·					
·							
-			_				
							
				· · · · · · · · · · · · · · · · · · ·			
				 	<u>=</u>		
		• • •	4016				
ective date	e, if other than the dee is listed, the date must be	ate of filing:	-2016	f filing or more than	(optio	nal) filing.) Purst	uant to 605.0
te: If the da	ite inserted in this bloc ective date on the Dep	k does not meet th	ne applicable stat	utory filing requir	ements, this	date will n	ot be listed
					-	1	
record sp	ecifies a delayed of the record	effective date,	but not an ef	fective time, a	t 12:01 a		ne earlie
ne 90th t	iay after the recor	a is filea.				AR AR	E ¹ E HARRING HARRING
	4-16		·			SS =	
						er sinte	
	S	ignature of a membe	er or authorized re	presentative of a me	nber	101 F	- -
		11		1		م الح	,

Page 3 of 3

Filing Fee: \$25.00