## 11600047956

(Re	equestor's Name)		
(Ad	ldress)		
(Ac	ddress)		
(Cit	ty/State/Zip/Phone	<del>=</del> #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nan	ne)	
(Do	ocument Number)		
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## **COVER LETTER**

Division	of Corporations			
SUBJECT: Exa	kt,LLC			
	any	_		
The enclosed Arti	cles of Amendment and fee	(s) are submitted for filing.		
Please return all c	orrespondence concerning	his matter to the following:		
		<u> </u>		
	<del></del>	Name of Pers	son	_
	Faro & Crowde	. P.A.		
	<del></del>	Firm/Compa	пу	<del></del>
	1801 Sarno Rd,	Suite 1		
		Address		<del></del>
	Melbourne, FL	32935		
	<del></del>	City/State and Zip	Code	*****
	jcrowder@farola			<u></u>
	E-ma	l address: (to be used for future	annual report notification)	
For further inform	ation concerning this matte	r, please call:		
J. Christopher Cr	owder, ESQ	321 at (	784-8158	2018
	Name of Person	Area Coo	de Daytime Telephone Num	nber # A B
				(O TE A > 40-
Enclosed is a chec	k for the following amount	:		
■ \$25.00 Filing	Fee \$30.00 Filing Certificate o	Status Certified C	opy Certif py is enclosed) Certif	Filing Fee

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**Registration Section** 

TO:

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

Exakt, LLC		
( <u>Name of the Limited L</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil	ity Company were filed on March 8, 2016	and assigned
lorida document number L16000047956		
his amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
he new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" of	the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	
Principal office address MUST BE A STREET A	DDRESS)	
•		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX	<u></u>	
3. If amending the registered agent and/or r		
egistered agent and/or the new registered office	address nere:	2016 ALL/
Name of New Registered Agent:		200 N
New Registered Office Address:		MS W
	Enter Florida street address	
_	, Flori	
	City	Zip Code

## New Registered Agent's Signature, if changing 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 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
AMBR	Joseph Guilfoyle	630 S Brevard Ave, Apt 1131	<b>∃</b> Add
		Cocoa Beach, FL 32931	□ Remove
			Change
AMBR	Joseph Gilfoyle	630 S Brevard, Apt 1131	
		Cocoa Beach, FL 32931	■ Remove
			☐ Change
			□ Remove
			☐ Change
			Remove
			□ Add
			Change □ Add
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					702771 )>	Õ	
Effective date, if other than the lift an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific an block does not	id cannot be prior meet the applica	to date of filing or	more than 90 days	o <b>ptional)</b> after filing.) ! i, this date w	Pursuant to	o 605.0207 e listed as
he record specifies a delay The 90th day after the re			t an effective	e time, at 12:	01 a.mo	n the e	arlier of
Dated March 21		, 2016	<u></u> .				

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Filing Fee: \$25.00