

L16000058978

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(City/State/Zip/Phone #)

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(Document Number)

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

2016 NOV - 7 AM 11: 35

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K. SALY

NOV - 8 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Lakedrop LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ABDULSELAM E COLAK

Name of Person

Lakedrop LLC

Firm/Company

2549 Maitland Crossing Way Apt#11-106

Address

Orlando, Florida 32810

City/State and Zip Code

ergincolak@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ABDULSELAM E COLAK

928-0107

at (**407**)

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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

FILED
2016 NOV -7 AM 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Lakedrop LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/23/2016 and assigned
Florida document number L16000058978.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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:

2549 Maitland Crossing Way Apt#11-106

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32810

Enter new mailing address, if applicable:

2549 Maitland Crossing Way Apt#11-106

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32810

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ABDULSELAM E COLAK

New Registered Office Address:

2549 Maitland Crossing Way Apt#11-106 Enter Florida street address

Orlando

Florida

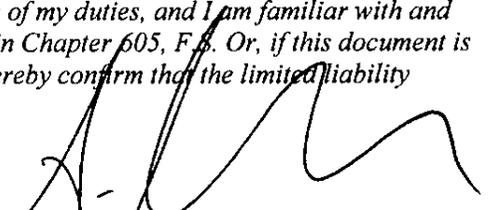
32810

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>	<u>Address</u>	<u>Type of Action</u>
MGR	HAKTAN Y KILIC	1405 Heavenly Cove	<input type="checkbox"/> Add
		Winter Park, FL 32792	<input checked="" type="checkbox"/> Remove
		(Remove from the company)	<input type="checkbox"/> Change
AMBR	ABDULSELAM F COLAK	2549 Maitland Crossing Way Apt #11106	<input type="checkbox"/> Add
		Orlando, FL 32810	<input type="checkbox"/> Remove
		(Title change from AR)	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

HAKTAN KILIC removes from Lakedrop LLC
Address of Lakedrop LLC changes
ABDULSELAM E COLAK's title changes to AMBR
ABDULSELAM E COLAK owns 100% of the Company

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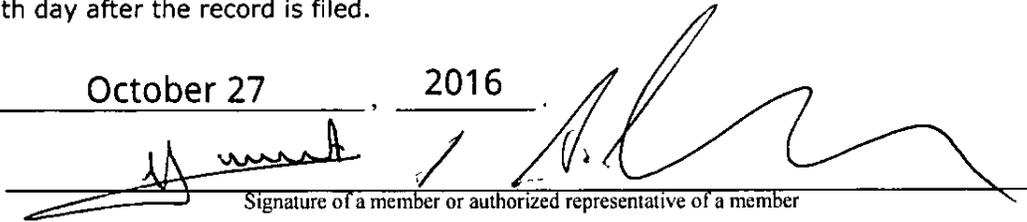
E. Effective date, if other than the date of filing: _____ (optional)

(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)(b)

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 October 27, 2016


Signature of a member or authorized representative of a member

Haktan Y Kilic / Abdulselam E. Colak
Typed or printed name of signee