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	(Requestor's Name)			
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COVER LETTER

TO: Registration Section Division of Corporations	* "
SUBJECT: YeshUA'S APIA	RIES, LLC
Name of Limite	d Crability Cympany
The enclosed Articles of Amendment and fee(s) are submit	itted for filing.
Please return all correspondence concerning this matter to	the following:
Paul V.C	Name of Person
The LAX	Firm/Company
1245 U	5 HIGHWAY 27 5
Se braig	(ity/State and Zip Code)
PAU (D. TA) Demait address: (to	be used for future annual report notification)
For further information concerning this matter, please call	t:
PAULV. CLOUCH Name of Person	at (863) 658-4357 Area Code Daytime Telephone Number
valie of refoor	Area Code Dayune Telephone Nature
Enclosed is a check for the following amount:	
25.00 Filing Fee \$\&\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	☐ \$55.00 Filing Fee & ☐ \$60.00 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

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Yeshua's ADIARIESILLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
2.7/2 (/
The Articles of Organization for this Limited Liability Company were filed on 03/08/20/16 and assigned
Florida document number <u>L/6/00/605/.</u> ()
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here: Shappares, Lacourage The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC".
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
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 on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent: PAUL V. Clouch
12115 1/5 (hahun 122)
New Registered Office Address:
Sebring Florida 33870-2172
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

Page 1 of 3

	uthorized Member		F.
<u>Title</u>	Name	Address	Type of Action
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			□ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

. It amend	ling any other information, enter change(s) here: Attach daditional sheets, if necessary.	,
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(If an effect Note: 12	date, if other than the date of filing: (optional) ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing the date inserted in this block does not meet the applicable statutory filing requirements, this date vit's effective date on the Department of State's records.	Pursuant to 605,0207 (3 kb) will not be listed as the
the recor) The 9	rd specifies a delayed effective date, but not an effective time, at $12\!:\!01$ a.m. of the day after the record is filed.	on the earlier of:
Dated	July 31 2017	
	Signature of a thember or authorized representative of a member	·· ···
	Charles K. Bayser Typed or printed name of sizenee	<u> </u>
	FT FT	
	Page 3 of 3	

Filing Fee: \$25.00