<u>L16000079637</u>

(Re	equestor's Name),	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Во	usiness Entity Nan	ne)
(Do	ocument Number)	
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SECRETARY OF STATE

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COVER LETTER

TO: Registration S Division of Co			.
SUBJECT:	WE'RE BU Name of Lim	PNING DAY LI	GHT LLC
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return ail corresp	ondence concerning this matter	to the following:	
	DANIE	Name of Person	<u> </u>
		Firm/Company	
	2662 5	SE 14 TH ST	
		Ret FL 3 City/State and Zip Code SEYOND NICE, Co to be used for future annual report notifi	3062
	DAN Q F 13-mail address: (SEYOND NICE, Co to be used for future annual report notifi	ication)
For further information	concerning this matter, please ca		
DANIEL	EuroT of Person	at (954) 123 Area Code Daytime	- 88 b / Telephone Number
Enclosed is a check for	the following amount:		
	□ \$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

	FNING DA	44L16HT	LL	<u></u>	
(<u>Name of the Limited Liability</u> (A Florida Li	Company as it now a imited Liability Compa	ppears on our record any)	(<u>ls.</u>)		
The Articles of Organization for this Limited Liability Con Florida document number <u>LIG000079637</u>	npany were filed o	n <u>4/19</u>	116	an	d assigned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limite	ed liability compar	ny here:			
The new name must be distinguishable and contain the words "Limited	d Liability Company."	the designation "LLC	C" or the a	bbreviatio	on "L.L.C."
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRE.	<u>(223)</u>			2012 2012	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			ETARY OF STATE	λY -5 P 4: 06	m U
B. If amending the registered agent and/or registered agent and/or the new registered office address		s on our record			ame of the new
Name of New Registered Agent:					
New Registered Office Address:	Ente	er Florida street addre	288		
		, F	lorida		
	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

MGR = N AMBR = 7	danager Authorized Member		
<u>l'itle</u>	<u>Name</u>	Address	Type of Action
16R	DANIEL J. ELLOTT	2662 SE 14TH ST	Add
		2662 SE 14TH ST POMPANO BCH, FL 33062	Remove
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effective date is e: If the date i iment's effecti	nserted in this bloc ve date on the Dep	e specific and cannot k does not meet t artment of State's	ot be prior to date of fi he applicable statute s records. but not an effe	ory filing requirem	ents, this date wi	II not be liste
ne 90th day	after the recor	d is filed.	Due not an ene	cave anne, at 1	2.01 0 0.	J. J. J.
ed	4/27	in i	2016 Elliott			
		<i>X</i>	er or authorized repre	-	TANK TANK	TI FIN

Filing Fee: \$25.00