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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	
	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:



For further information concerning this matter, please call:

Enclosed is a check for the following amount:



Certificate of Status

\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (addutonal 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 2664 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT
ТО
ARTICLES OF ORGANIZATION
OF
T. Flany Spyridakos LLC (<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on March 15 2017 and assigned
Horida document number 16000092101
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 "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 BON)
B. If amending the registered agent and/or registered office address on our records. <u>enter the name of the n</u> registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, Florida
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. Thereby 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>	Name	Address	Type of Action
MGR	Louie Spyridakos	2994 Northfield Dr. Tarpon Springs PL 346	X Add
		Tarpon Springs PL 346	89 🛛 Remove
			Change
			🛛 Add
			🗍 Remove
			Change
			D Add
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			Remove
			Change
			O Add
			Remove
			Change
			Add
			Remove
			Change

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

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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.

. 2017 Dated July 6th <u>Signature of a member or author ded representative of a member</u> Typed or printed name of signee ANNI SANDAKOS

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Filing Fee: \$25.00