# 21600119407

(Re	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	
(Ci	ity/State/Zip/Phone #	)
PICK-UP	WAIT	MAIL
(Br	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	f Status
Special Instructions to	Filing Officer:	

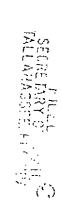
Office Use Only



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## **COVER LETTER**

Division (	of Corporations		
EPIC SUBJECT:	RETAIL TAMIAMI, LLC		
<u>-</u>	Name of Lim	ited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are sub	mitted for filing.	
Please return all co	rrespondence concerning this matter	to the following:	
	ANDREW J HUPP		
		Name of Person	
	EPIC RETAIL TAMIAMI	. l.LC	
	-	Firm/Company	<del></del>
	907 S FT HARRISON AV	E. SUITE 102	
		Address	
	CLEARWATER, FLORID	DA 33756	
	SSUCEVIC@EPICDEVCC	City/State and Zip Code	
	<del>=</del>	to be used for future annual report notifi	cation)
For further informa	ation concerning this matter, please ca	all:	
SUE SUCEVIC		727 210-1900 at ()	
ì	vame of Person	Area Code Daytime	Telephone Number
Enclosed is a check	s for the following amount:		
■ \$25,00 Filing E	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:

TO: . Registration Section

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

EPIC RETAIL TAMIAMI, LLC		
(Name of the Limited Liability (A Florida l	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number 1.16000119407	ompany were filed on June 21, 2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered		ter the name of the new
registered agent and/or the new registered office addre	ess nere:	
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, 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
Mgr/AMI	Andrew J. Hupp	907 S Ft. Harrison Ave #102	
		Clearwater, Florida 33756	■ Remove
			☐ Change
Mgr 	Hupp Holdings, LLC	907 S Ft. Harrison Ave #102	■ Add
		Clearwater, Florida 33756	🖸 Remove
			Change
Mgr/AMI	Justin Basil	2419 W Kennedy Blvd., #100	Add
		Tampa, FL 33609	<u></u> ■ Remove
			☐ Change
Mgr	Rocwell Investments, LLC	2419 W Kennedy Blvd., #100	■ Add
		Tampa, FL 33609	Remove
			Change
		-	
			□ Remove
		-	Change
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ffective date, if							(optional)		
an effective date is l lote: If the date in	isted, the date must iserted in this blo	be specific and ck does not to	d cannot be meet the a	prior to date pplicable st	of filing or m atutory filing	ore than 90 day g requiremen	's after filing.) Pu ts. this date wi	ursuant to 60 Il not be lis	)5,0201 sted as
ocument's effective						<b>3</b> - 1			
e record specil The 90th day				t not an	effective t	ime, at 12	:01 a.m. on	the earli	ier o
November 2	9		2017						
							~		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00