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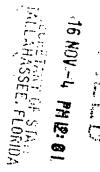
(Req	uestor's Name)	
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COVER LETTER

TO: Registration So Division of Con		
	Global, LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	Amendment and fee(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	Valerie A. Ellis	
	Name of Person	
	Luminary Global, LLC	
	Firm/Company	
	2126 Bayou Grande Blvd NE	
	Address	
	Saint Petersburg, FL 33703	
	City/State and Zip Code	
	vellis@luminaryint.com	
	E-mail address: (to be used for future annual report notification)	
For further information of	concerning this matter, please call:	
Valerie A. Ellis	813 753-8589 at ()	
Name o	of Person Area Code Daytime Telephone Number	
Enclosed is a check for t	he following amount:	
\$25.00 Filing Fee	■ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Certificate of Status Certified Copy (additional copy is enclosed) Certified Cop (additional copy	Status &

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

Luminary Global, LLC				
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)			
The Articles of Organization for this Limited Liability Compa	ny were filed on June 27, 2016	aı	nd assi	gned
Florida document number L16000122723				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited li	ability company here:			
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "LLC" o	the abbreviat	ion "L.I	C."
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)		<u>;</u>		
			16	
		<u> </u>	AON	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address on our records,	enter the n	ame	of the no
registered agent and/or the new registered office address h	<u>ere</u> :	Ē,		<i>}</i>
		77	200	
Name of New Registered Agent:		71.5	Ž	Section 1
		Ę.	G	
New Registered Office Address:	Enter Florida street address			
	. Flori	dя		
•	City , Tion		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 = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Jeremy A. Lavin	2126 Bayou Grande Blvd NE	
		Saint Petersburg, FL 33703	■ Remove
			Change
MGR	Malcrie A. Ellis		⊅€ Add
			Remove
			Change
			25. • Add 60 25. • 70
			No. 1 Remove
			CORA COMMISSION OF THE
			□ Remove
			☐ Change
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of fili	(optional) ing or more than 90 days after filing.) Pursuant to	605.02
<u>lote:</u> If the date inserted in this block does not meet the applicable statutor ocument's effective date on the Department of State's records.	ry filing requirements, this date will not be	listed a
e record specifies a delayed effective date, but not an effec The 90th day after the record is filed.	ctive time, at 12:01 a.m. on the ea	ırlier
ated 2 NN 14		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00