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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
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CHETARY OF STATE LAHASSEE, FLORID

S. WARREN 'JUL 0 8 2017

# **COVER LETTER**

Division of Corp					
SUBJECT:	FOR A DURP	ose LLC			
	Name of Lim	ited Liability Company	<del></del>		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	<u>Kennet</u>	Name of Person  PURPOSE LLC  Firm/Company			
	_	Name of Person			
	FOR A	PURPOSE LLC			
		Firm/Company			
	3781	Catania PLACE	2		
		Address	<u> </u>		
	JACKSO	nville, FL 32.	224		
City/State and Zip Code					
City/State and Zip Code  Ken Miller 2008 agail. Com  E-mail address: (to be used for future annual report notification)					
For further information co	oncerning this matter, please of		neuton)		
To future anomation co	moorning this matter, prease of	uii.			
		at () Area Code Daytim	<del></del>		
Name of	Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for the	a fallowing amounts				
	_	T \$55 00 Eiling Egg &	□ \$40.00 Eiling Foo		
\$25.00 Filing 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: 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

FOR A PUPROSE (Name of the Limited Liability Compan	UCC ny as it now appears on our	r records.)
(Name of the Limited Liability Compan (A Florida Limited Li	iability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number	were filed on <u>July</u>	12, 2016 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation	on "LLC" or the abbreviation "L.L.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)		
B. If amending the registered agent and/or registered off		records, enter the name of the new
registered agent and/or the new registered office address here	•	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	et address
	, Florida	
<del></del>	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pi being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my dui rovided for in Chapter	ties, and I am familiar with and r 605, F.S. Or if this decument is

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Address</u> **Type of Action** <u>Name</u> □ Add ☐ Remove \_□ Change □ Add □ Remove ☐ Change \_□ Add ☐ Remove \_ Change \_□ Add \_□ Remove \_□ Change \_□ Add □ Remove

□ Change

D. If amer	ending any other information, enter change(s) here: (Attach additional sheets, if necessar	y.)
	in the event of the death of LAMA	?. Millerz,
1	or the death of Lava P. Miller and K	Lenneth H.
	in the second	Purpose
		n Lon
<u> </u>	Currington IR. and the LLC clisso	<del></del>
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(If an effective Note: I	ve date, if other than the date of filing:	.) Pursuant to 605.0207 (3)(b
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. 90th day after the record is filed.	on the earlier of:
Dated _	26 June , 2017. DANGE!	Mellen
	Signature of a member or authorized representative of a member	
	Typed or printed name of signee	
		STA
	Page 3 of 3	5 H 2

Filing Fee: \$25.00