L16000140988

| (Requ | estor's Name) | |
|-----------------------------|-----------------|-------------|
| - (Addre | ess) | |
| (Addre | ess) | · |
| (City/S | State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busir | ness Entity Nar | me) |
| (Docu | ment Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Fil | ing Officer: | |
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| eum rez | | NZALEZ LLC | | | |
| SUBJEC | UI: | Name of Lim | ited Liability Company | -11-11 | |
| The encl | losed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please re | eturn all correspo | ondence concerning this matter | to the following: | | |
| | | ERICH GONZALEZ | | | |
| | | | Name of Person | | |
| | | ERICH GONZALEZ LLC | | | |
| | | | Firm/Company | | |
| | | 1823 SANCHEZ AVE | | | |
| | | | Address | | |
| | | LAKELAND, FL 33801 | | | |
| | | | City/State and Zip Code | , | AHASS |
| | | ERICHGLEZ1974@GMAI | | | 29 T |
| | | E-mail address: (| to be used for future annual re | eport notification) | ाष्ट्री ए ह |
| For furth | ner information c | oncerning this matter, please ca | all: | | |
| ERICH | GONZALEZ | | 786 661- | -6244 | 26 2154 |
| | Name o | f Person | Area Code | Daytime Telephone N | lumber |
| Enclosed | d is a check for th | ne following amount: | | | |
| \$25. | 00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | osed) Ce | .00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed) |
| | Registr Divisio | ING ADDRESS: ration Section on of Corporations ox 6327 | Registratio | /COURIER ADDRE on Section of Corporations ailding | ess: |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ERICH GONZALEZ LLC | | |
|--|---|-----------------------------|
| (<u>Name of the Limited Liabi</u> (A Florid | lity Company as it now appears on our records.) la Limited Liability Company) | |
| The Articles of Organization for this Limited Liability Florida document number L16000140988 | | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the lin | nited liability company here: | |
| The new name must be distinguishable and contain the words "Lin | mited Liability Company," the designation "LLC" or | r the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADD | RESS) | Fig. 22 |
| | | |
| | WAS LA | 61 N |
| Enter new mailing address if applicables | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office ade | stered office address on our records, <u>e</u> dress here: | enter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | _ | |
| | Enter Florida street address | |
| | , Floric | da |
| | 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 | ERICH GONZALEZ | 1823 SANCHEZ AVE | |
| | | LAKELAND, FL 33801 | □ Remove |
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| | | | □ Add |
| | | W W 71A | ☐ Remove |
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| fective date, if other than the da | ate of filing: | (optional) | |
| | | g or more than 90 days after filing.) Pursuant to 60 y filing requirements, this date will not be lis | |
| cument's effective date on the Department | irtment of State's records. | | |
| record specifies a delayed s | offective date, but not an effect | tive time, at 12:01 a.m. on the earl | ier |
| The 90th day after the recor | | are time, at 12.01 aim, on the carr | |
| AUGUST 19 | 2016 | | |
| ated | , | | |
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Page 3 of 3

Filing Fee: \$25.00