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| (Req | uestor's Name) | - |
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| bbA) | ress) | |
| (Add | ress) | |
| (City | /State/Zip/Phone | #0 |
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| PICK-UP | ☐ WAIT | MAIL |
| (Bus | iness Entity Nam | e) |
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| (Doc | ument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to F | iling Officer: | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: Edgar Mora to LLC 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: |
| Jessica Morato Name of Person |
| Edgar Morato, LLC Firm/Company |
| 2411 Oruail ave |
| Jack Sonville, FL 32218 City/State and Zip Code |
| E-mail address: (to be used for future annual Jeport notification) |
| For further information concerning this matter, please call: |
| Jessica Movato at 904 410 - 1744 Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| □ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

| Edgar | | LC | |
|---|---|---------------------------------|---------------------------------------|
| (Name of the Limited (A | Liability Company as it new as Florida Limited Liability Compa | ppears on our records.) any) | |
| The Articles of Organization for this Limited Liab | ility Company were filed or | n 8-11-16 | and assigned |
| Florida document number <u>L 16000 150</u> | <u> 384</u> . | | |
| This amendment is submitted to amend the follow | ing: | | |
| A. If amending name, enter the new name of the new name must be distinguishable and contain the word Enter new principal offices address, if applicable | e limited liability compar | ny here: | <u> </u> |
| The new name must be distinguishable and contain the word | ls "Limited Liability Company," | the designation "LLC" or the | abbreviation QL.C." |
| Enter new principal offices address, if applicab | le: | | 9 - 3 F |
| (Principal office address MUST BE A STREET) | | , | |
| | | | 3 FT O |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BO | <u></u> | , , | · · · · · · · · · · · · · · · · · · · |
| B. If amending the registered agent and/or registered agent and/or the new registered offic | | s on our records, <u>ent</u> | er the name of the new |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | Enter | r Florida street address | |
| | | . Florida | |
| · | City | | Zip Code |
| New Devistant Agent's Signature if changing Des | deta-ad August | | |

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> | Name | Address | Type of Action |
|---------------------------------|--------------|--|------------------|
| MGR | Edgar Movato | 2411 Owail are | /20 Add |
| | | 2411 Owail ave Jacksonville, FL 32218 | □ Remove |
| | | | ☐ Change |
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| | Edgar | na nu - L- | | | | |
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| | Jessia | Morato | 50 %. | | | |
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| | (| cll # | | 923-9365 | | |
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| If an effective Note: If the | ate, if other than the d date is listed, the date must be date inserted in this bloc effective date on the Dep | e specific and cannot be pr k does not meet the app | licable statutory | (optional) or more than 90 days after filing filing requirements, this date | ,) Pursuant to 605.0 | 0207 (d as (|
| | specifies a delayed on the record | | not an effectiv | ve time, at 12:01 a.m. | on the earlier | r of: |
| Dated | 10-31-16 | | <u>.</u> | | , | |
| _ | s | ignature of a member or a | uthorized represent | ative of a member | , | |

Page 3 of 3

Filing Fee: \$25.00