16000156213

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COVER LETTER

	Registration Se Division of Cor						
ALL NEW YEAR	Roberts Co	mmercial					
SUBJEC	I:	Name of Limited Liability Company					
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please ret	urn all correspo	ndence concerning this matter	to the following:				
		Jeffrey Roberts					
		<u></u>	Name of Person	· · · · · · · · · · · · · · · · · · ·			
		Roberts Commercial					
			Firm/Company				
	4385 Eli Whitney Dr						
	Address						
		Middleburg, FL 32068					
	City/State and Zip Code						
	jeffroberts2@mail.com						
		E-mail address: (to be used for future annual report notif	ication)			
For furthe	r information co	oncerning this matter, please c	all:				
William I) Erwin		904 838-7000 at ()				
	Name of	Person	Area Code Daytime	e Telephone Number			
Enclosed i	s a check for th	e following amount:					
\$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**

ROBERS COMMERCIAL				
(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)			
The Articles of Organization for this Limited Liability Company were filed on August 11. Florida document number L16000156213				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability company here:				
The new name must be distinguishable and contain the words "Limited Liability 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:	28.			
(Mailing address MAY BE A POST OFFICE BOX)				
	SS			
B. If amending the registered agent and/or registered office address on our registered agent and/or the new registered office address here:				
registered agent and/or the new registered office address here.				
	84 2			
Name of New Registered Agent:	5			
New Registered Office Address:				
Enter Florida street	address			
	, Florida			

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
AMBR	Lawrence Bryarly Gilmore III	11491 Revenue Ct Jacksonville, FL	Add
			□ Remove
			☐ Change
			□ Add
			Remove
			☐ Change
· · · · · · · · · · · · · · · · · · ·		Add 16 Dr. Remover ASS	
-	**************************************		Change PAdd PA
			☐ Change
			Remove
			☐ Change
			Add
			☐ Remove
			□ Change

D. If amending any other information, enter change(s) he	re: (Attach additional sheets, if necessary.)
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49 km - Warner and American and	260
	PASS
	(n) (n)
C. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prio Note: If the date inserted in this block does not meet the applic document's effective date on the Department of State's records	(optional) r to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) cable statutory filing requirements, this date will not be listed as the
the record specifies a delayed effective date, but no b) The 90th day after the record is filed.	ot an effective time, at 12:01 a.m. on the earlier of:
Dated December 9th , 2016	
Signature of a member of auth	orized representative of a member
Jeffrey Roberts	
Typed or print	ed name of signee

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Filing Fee: \$25.00