[14000156582

(Re	questor's Name)	
(Ad	dress)	
. (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
:		

Office Use Only



300308529893

02/02/18--01023--003 **25.00



FEB 2.6 MIN J. HARRIS

COVER LETTER

10: Registration Section Division of Corporations
SUBJECT: HOWARD LAWRENCE 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:
HOWARD LAWRENCE Name of Person
HOWARD LAWRENCE LLC Firm/Company
628 BURGUNDY N
DelRay Beach FL 33484 City/State and Zip Code delRay Howard a As L. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Houard Lawrence at (561) 306-1699 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certificate of Status 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 5, 2018

HOARD LAWRENCE 628 BURGUNDY N DELRAY BEACH, FL 33484

SUBJECT: 628 BURGUNDY N, LLC

Ref. Number: L16000156582

We have received your document for 628 BURGUNDY N, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

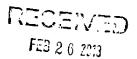
The form you submitted is for a Foreign LLC, but your entity is a Florida LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 418A00002379



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

628 Burgur	OF ndy N, LLC	
(Name of the Limited Liability	Company as it now appears on our relational Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 8 1/8 1	16 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit HOWARD LAWREN	ICELLC	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation '	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
<u>(Principal office address MUST BE A STREET ADDRI</u>	ESS)	F 443 C
		The state of the s
		W DO serve
Enter new mailing address, if applicable:	<u> </u>	~ ** On *
(Mailing address MAY BE A POST OFFICE BOX)		g T

		4000
B. If amending the registered agent and/or registered agent and/or the new registered office addre		ords, enter the name of the new
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street aa	dress
		. Florida
	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

Learnending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			□ Add
			Remove
			□ Change
			□ Add
			☐ Remove
			☐ Change
			Add
			□ Remove
		· · · · · · · · · · · · · · · · · · ·	Change
			Add Grass
			—————————————————————————————————————
			□ Add
			Remove
			□ Change

•		_
		-
		-
		-
		-
		
		-
		-
· ·		-
		-
		-
		-
		-
		-
		-
		-
ective date, if other than the date of filing: (opti-	anal)	
dective date, if other than the date of filing:	filing.) Pursuant to 60	5.0207 ted as
annone a checure date on the Department of Bate a records.		
		ier o
record specifies a delayed effective date, but not an effective time, at 12:01 a	a.m. on the earl	
record specifies a delayed effective date, but not an effective time, at 12:01 at the 90th day after the record is filed.	a.m. on the earli	
record specifies a delayed effective date, but not an effective time, at 12:01 a the 90th day after the record is filed.	a.m. on the earli	When's
record specifies a delayed effective date, but not an effective time, at 12:01 a the 90th day after the record is filed.	a.m. on the earli	When 's
record specifies a delayed effective date, but not an effective time, at 12:01 at the 90th day after the record is filed. The boward 19, 2018 Howard Laurence Signature of a member or authorized representative of a member	2018 FE	Upan's G Carross Chada Chada
record specifies a delayed effective date, but not an effective time, at 12:01 a feed feeling after the record is filed. Howard Laurence	20 mg 70 mg	theory to except expense expense

Page 3 of 3

Filing Fee: \$25.00