## 116000157165

(Keq	uestor's Name)	
(Addı	ess)	
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(City/	State/Zip/Phon	e #)
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PICK-UP	☐ WAIT	MAIL
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(Busi	ness Entity Na	me)
(Doci	ument Number	)
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	
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Office Use Only



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16 SEP 26 PH 4: 31 DIVISION OF CORPORATIONS

O SIMMONS SEP 28 2016

## **COVER LETTER**

Registration Section

P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Co	rporations			
ClearHarb	or Group LLC			
SUBJECT:		ited Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
	ondence concerning this matter	_		
	onderson venderning time matter	to the following.		
	Kelly Leko			
		Name of Person	<del></del>	
	ClearHarbor Group LLC			
		Firm/Company	<del></del>	
	1010 Park Court Unit F			
	<del></del>	Address	<u></u>	
	Safety Harbor, FL 34695			
		City/State and Zip Code		
	info@clearharborgroup.con	n to be used for future annual report notificatio	<u>n)                                    </u>	
For further information of	concerning this matter, please c	•	•••	
Kelly Leko		727 7445788		
	of Person	at ()	phone Number	
			•	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section of Status & Certificate of Status & Certified Copy (additional copy is enclosed?)  ADDRESS:	16 SEP 21
MAIL	ING ADDRESS:	STREET/COURIER A	ADDRESS: 응	6 PH
	ration Section on of Corporations	Registration Section Division of Corporations	o#A/I	4: - <del>1</del>

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ClearHarbor Group LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited I	<b>ny as it now appears on c</b> Liability Company)	ur records.)	<del></del>	
The Articles of Organization for this Limited I	Liability Company	were filed on $8/22/16$		and assigned	
This amendment is submitted to amend the fol	llowing:				
A. If amending name, enter the new name	of the limited liab	ility company here:			
n/a					
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designa	tion "LLC" or the abbrevi	iation "L.L.C."	_
Enter new principal offices address, if appli	icable:	n/a		<del></del>	_
(Principal office address MUST BE A STRE	ET ADDRESS)				
				<b>元</b> 6	_
				16 SEP 2	7
Enter new mailing address, if applicable:		n/a			
( <u>Mailing address MAY BE A POST OFFICE</u>	E_BQX)			9H Ψ 3I	T
	<del></del>			023 -	
				-i <sub>ω</sub>	_
B. If amending the registered agent and			records, enter the		nev
registered agent and/or the new registered (	office address her	<u>e</u> :			
Name of New Registered Agent:	Chris F Leko	<del></del>			_
New Registered Office Address:	1010 Park Cour	t Unit F			
TAIL TABINITAE VISION TONINGS.		Enter Florida str	eet address	· · · · · · · · · · · · · · · · · · ·	_
	Safety Harbor		, Florida <sup>34695</sup>		_
		City	Z	ip 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>	tle Name Address		Type of Action
AMBR	Chris F Leko	1010 Park Court Unit F	Add
			Remove
			Change
			Add
			Remove
			Change
			Add  ON THE PROPERTY OF THE PR
			16 PRemove PM 4: 31 PM GRemove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
			□ Remove
			T Changa

Please add Chris F Leko as a re	gistered agent.				_
·					
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fective date, if other than the d m effective date is listed, the date must be ote: If the date inserted in this block current's effective date on the Dep	ck does not meet the app	licable statutory:	or more than 90 days af filing requirements, t	tional) ter filing.) Pursuant to 6 his date will not be li	05.02 sted
record specifies a delayed The 90th day after the reco	rd is filed.			a.m. on the ear	lier
September 22nd	2016				
Kelly Leko	, L. L.	<del></del> •			
Nel4	reges .	3		<del> </del>	

Page 3 of 3

Filing Fee: \$25.00