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## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: 2001	Positive 1	ided Liability Company	
	Amendment and fec(s) are sub		
Please return all correspo	ndence concerning this matter	to the following:	
	LEO	C. NAGY Name of Person	<del></del>
		Audit of a cition	
		FirmvCompany	
		W. AAR ST.	2019 JU
	ORUM	JAO TC. 328	2019 JUN 25 PH 1:46  0.3800 Telephone Number
	LEO NA E-mail address:	6-7 e BELLSOUT	71. NET
For further information c	oncerning this matter, please of	call:	+6
LEO	NAGY of Person	at ( <u>467)</u> 43.	O. 3800
Name C	it reison	Area Code Dayumo	. receptione realises
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regist Divisi P.O. F	ING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce	n rations rater Circle
		Tallahassee, FL 32	301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Com	DE FLORIDA: LLC
(Name of the Limited Liability Compa (A Florida Limited Liability Compa)  The Articles of Organization for this Limited Liability Compa  Florida document number / 6000177683	ny were filed on and assigned
A. If amending name, enter the new name of the limited li  BUILD POSITIVE  The new name must be distinguishable and contain the words "Limited Li	ability company here:  LLC ability Company," the designation "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: (Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FC 32804
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address on our records, enter the name of the new nere:
Name of New Registered Agent:  New Registered Office Address:	LEO C. NAGY  114 W. PAR ST.  Enter Florida street address
	ORLANDO , Florida 32804  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

Type of Action **Address** Title Name 32804 MARK C. ANDERSON 114 W. PAR STORIANC, FL. Add AMBR ☐ Remove \_□ Change □ Add ☐ Remove Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

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Filing Fee: \$25.00