

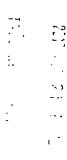
(Req	juestor's Name)	
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(City	/State/Zip/Phone	= #)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
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COVER LETTER

то:		stration Secti sion of Corpo					
SUBJEC		WEBB FLOR	IDA REALTY LLC				
SUBJE	CI.		Name of Lim	ited Liability Company			
The encl	losed	Articles of Ar	mendment and fee(s) are sub	mitted for filing			
			lence concerning this matter	_			
			JASMINE RODRIGUEZ				
				Name of Person			
			BEST QUICK TAX RETU	JRNS INC			
			·	Firm/Company			
			320 S BUMBY AVE STE	10			
				Address			
			ORLANDO FL 32803				
				City/State and Zip Code	e		F 5 3
			E-mail address: (to be used for future annua	il report notificat	lion)	,J
For furth	her in	formation con	cerning this matter, please ca	all:			· ·
JASMIN	NE R	ODRIGUEZ		407 8	96-7921		Ü
		Name of P	erson	Area Code	Daytime Te	elephone Number	
							÷
Enclosed	d is a	check for the	following amount:				
\$25.00 Filing Fee		ling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is e		☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)	
			G ADDRESS:		ET/COURIER	ADDRESS:	
			ion Section of Corporations		ation Section n of Corporatio	ons	
P.O. Box 6327 Tallahassee, FL 32314			6327	Clifton	Building xecutive Center		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

WEBB FLORIDA REALTY LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited I	,		6	and as	ssioned
<u>-</u>					,0.Bca
The Articles of Organization for this Limited Liability Company were filed on 10/13/2016 and assigned Florida document number L16000190014 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 "LLC" or the abbreviation "LLC" 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 9145 NARCOSSEE RD SUITE 208 Enter Florida street address ORLANDO Florida 32827 To Code					
A. If amending name, enter the new name of	of the limited liab	ility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	on "LLC" or the at	breviation "l	L.L.C."
Enter new principal offices address, if appli	cable:	ALICA NA DOCCER DE	2 CT INC. 200		
(Principal office address MUST BE A STRE)	ET ADDRESS)	•	SUITE 208		
		ORLANDO FL 32827			
Enter new mailing address, if applicable:			.	F(B)	
	r ROX)			. ,	- 1
Induing dualess MAT BE AT OUT OF FICE	. <u> </u>			\ <u>\</u>	•
B. If amending the registered agent and	1/or registered o	ffice address on our	records, enter	- the name	of the ne
			; ;		-
Name of New Registered Agent:			**	:	
	0145 NAPCOS	2000 91) 011170 209			
New Registered Office Address:	9143 NARCOS		et address		
	ORLANDO		Florida ³²	827	
		City	, 1 6011444	Zip Code	,

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:

Т

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
CEO	WEBB PROPERTIES MANAGEN	9145 NARCOSSEE RD STE 208	
-		ORLANDO FL 32827	□ Remove
			☐ Change
AMBR	PAULO C SILVA	9145 NARCOSSEE RD STE 208	
		ORLANDO FL 32827	Remove
			E Change
			Add
			~> □ Remove
			□ Change
			Add
			Remove
			☐ Change
			☐ Remove
			Change
			
			□ Remove
			Change

				
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in effective date is listed, the di	an the date of filing:	date of filing or more than 90 day	(optional) ys after filing.) Pursuant to 605. ts, this date will not be liste	.0207 :d as
	the Department of State's records.			
e record specifies a de The 90th day after th	layed effective date, but not e record is filed.	an effective time, at 12	:01 a.m. on the earlie	er of
ated	2017			
ated	1	- •		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00