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

	Registration Se Division of Co			
SUBJEC	Station 88,			
SUBJEC	ET:		nited Liability Company	11 75
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Simon M. Canasi		
			Name of Person	
		Station 88, LLC		
			Firm/Company	
		3410 W. Douglas Street		
			Address	
		Tampa, FL 33607		
			City/State and Zip Code	
		simon.canasi@wobusa.com		
Cou fouther	or in formation of		to be used for future annual report no	tification)
ror luring	r intormation c	oncerning this matter, please co	au:	
Simon M	. Canasi		813 3008543 at ()	
	Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	0 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 Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301

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

Station 88, LLC				
(<u>Name of the Limited</u> (A	Liability Compa Florida Limited I	ny as it now appears on our re Liability Company)	cords.)	
The Articles of Organization for this Limited Liab	ility Company	were filed on 10/16/2016	and assigned	
Florida document number L16000191726	·			
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	e limited liab	ility company here:		
he new name must be distinguishable and contain the word	ls "Limited Liabil	ity Company," the designation "	LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicabl	le:	3410 W. Douglas Street		
Principal office address MUST BE A STREET A	A <u>DDRESS)</u>	Tampa, FL 33607		
Enter new mailing address, if applicable:		3410 W. Douglas Street		
(Mailing address MAY BE A POST OFFICE BOX)		Tampa, FL 33607		
If amending the registered agent and/or	registered of	fice address on our reco	ords, enter the name of the	
egistered agent and/or the new registered office	Simon M. Cana			
egistered agent and/or the new registered office Name of New Registered Agent:		si		
egistered agent and/or the new registered office Name of New Registered Agent:	Simon M. Cana	si	dress	
Name of New Registered Agent: New Registered Office Address:	Simon M. Cana	si ns Street Enter Florida street ad	edress Florida 33607 Ziv 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

Page 1 of 3

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>	<u>Name</u>	Address	Type of Action
AMBR	Bamalex, Inc.	3410 W. Douglas Street	
		Tampa, FL 33607	Remove
			☐ Change
			Add
			☐ Remove
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			□ Add
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			□ Add
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			Add Amove
<u>_</u>			7 day 9: 25 7 of STATE SEE FLORDA
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Please remove Bamalex, Inc.	as AMBR			
				
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	06/05/2017		, d. B	
ective date, if other than the effective date is listed, the date must	date of Hing:	ate of filing or more than 90	(optional) days after filing,) Pursuant	to 605.
e: If the date inserted in this blo	ock does not meet the applicable	statutory filing requirem	ents, this date will not b	oe liste
ument's effective date on the De	partment of State's records.			
record specifies a delayed he 90th day after the reco	effective date, but not ar	n effective time, at 1	.2:01 a.m. on the	earlie
ne sour day arter the reco	na is mea.			
June 5	2017			
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	Charter of a manifest or authorize	d recommendate of Community	2 <u>26 5</u>	—-т
<i></i>	Signature of a member or authorized		SS -	Ē
			<u> </u>	
	SIMON M	CAN/ASI		ED

Page 3 of 3

Filing Fee: \$25.00