L16000192128

| (Requestor's Name) |
|---|
| (Address) |
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| (City/State/Zip/Phone #) |
| (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) |
| (Business Entity Name) |
| (Document Number) |
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| 10: | Division of Cor | | | | | |
|------------------------------|------------------------------|--|---|--|--|--|
| CHID IF | | n Agency, LLC | | | | |
| SUBJE | CI: | Name of Limi | ted Liability Company | | | |
| The enc | closed Articles of | Amendment and fee(s) are sub | nitted for filing. | | | |
| | | ndence concerning this matter | | | | |
| | | Edwin C. Lunsford, Esq. | | | | |
| | | | Name of Person | Code Innual report notification) 626-1011 Daytime Telephone Number Fee & S60.00 Filing Fee, py Certificate of Status & Certified Copy (additional copy is enclosed) REET/COURIER ADDRESS: | | |
| | | Eavenson Fraser Lunsford | & Ivan, PLLC | | | |
| | | | Firm/Company | | | |
| | | 2000 PGA Blvd., Suite 320 | 00A | | | |
| | | | Address | | | |
| | Palm Beach Gardens, FL 33408 | | | | | |
| | | | City/State and Zip Code | | | |
| | | ed@efli.law | to be used for future annual report notif | fication) | | |
| For fur | | oncerning this matter, please ca | | | | |
| Edwin C. Lunsford, III, Esq. | | | 561 626-1011 at () | | | |
| Name of Person | | | e Telephone Number | | | |
| Enclose | ed is a check for t | he following amount: | | | | |
| □ \$2: | 5.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy | | |
| | Regist Divisi | ING ADDRESS: ration Section on of Corporations | Registration Section Division of Corpor | n | | |
| | | ox 6327 assee; FL 32314 | Clifton Building 2661 Executive Ce | | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ART | TCLES OF AMENDMENT |
|---|--|
| | TO |
| ARTI | CLES OF ORGANIZATION |
| | OF |
| The Sheethan Agency, LLC | TCLES OF AMENDMENT TO CLES OF ORGANIZATION OF The Liability Company as it now appears on our records. A Florida Limited Liability Company) ability Company were filed on October 18, 2016 and assigned |
| (Name of the Limite | th Liability Company as it now appears on our records.) |
| · | (A Florida Limited Liability Company) |
| The Articles of Organization for this Limited Li | ability Company were filed on October 18, 2016 and assigned |
| Florida document number L16000192128 | |
| This amendment is submitted to amend the folio | |
| | |
| A. If amending name, enter the new name of | the limited liability company here: |
| The new name unust be distinguishable and contain the w | ords "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." |
| Enter new principal offices address, if applies | able: |
| (Principal office address MUST BE A STREE | |
| | |
| | |
| 70 | |
| Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE) | 30X) |
| | |
| B. If amending the registered agent and/ registered agent and/or the new registered of | or registered office address on our records, enter the name of the new lice address here: |
| Name of New Registered Agent: | Richard C. Sheehan |
| | 500 University Blvd., Suite 207 |
| New Registered Office Address: | Enter Florida street orbbess |
| | |
| | Jupiter Plorida 33458 City Zip Code |
| New Registered Agent's Signature, if changing F | • |
| | |
| provisions of all statutes relative to the prope accept the obligations of my position as regi | d agent and agree to act in this capacity. I further agree to comply with the er and complete performance of my duties, and I can familiar with and stered agent as provided for in Chapter 605, F.S. Or, if this document is registered office address, I hereby confirm that the limited liability change. |
| | If Changing Registered Agent, Signature of New Registered Agent |

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 |
|--------------|--------------------|---------------------------------|----------------------|
| MGR | Richard C. Sheehan | 500 University Blvd., Suite 207 | |
| | | Jupiter, FL 33458 | Remove |
| | | | Change |
| MGR | Daniel R. Sheehan | 500 University Blvd., Suite 207 | |
| | | Jupiter, FL 33458 | Remove |
| | | | ☐ Change |
| | | | |
| | | | □ Remove |
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| Si | shature of a member or authorized repre | esentative of a member | pro gran | 35 25 25 25 25 25 25 25 25 25 25 25 25 25 |
|---|---|----------------------------------|------------------|--|
| ted | | | | |
| ted 11/15 | 2016 | | | |
| record specifies a delayed e The 90th day after the record | ffective date, but not an effe d is filed. | ective time, at 12:01 a.m | n. on the earlie | r of: |
| te: If the date inserted in this block cument's effective date on the Depa | | ory filing requirements, this de | ato | e will not be liste |
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Filing Fee: \$25.00