## L16000196047

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D. SCOTT DEC 2 2 2016

## **COVER LETTER**

TO: Registration S Division of Co		v.	te · · · · · · · · · · · · · · · · · · ·	
SUBJECT:	Space Coqui	ua SC, LLC ited Liability Company Ooc # L	16000196047	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Phillip Co	(esson) Name of Person	· · · · · · · · · · · · · · · · · · ·	
	Chessow G	Name of Person  Frank LLC Firm/Company		
	147/ Noc	Address		
		Chy/State and Zip Code		
	E-mail address: (	to be used for future annual report noti	nication)	
For further information	concerning this matter, please ca	all:		
Phi.Lh.ig Name	Chassow of Person	at ( <u>727</u> ) <u>744</u> Area Code Daytim	18 <b>5</b>	
Enclosed is a check for t	the following amount:		三	1 =
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is exclosed)	EN ED

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Lisbility Compar (A Florida Limited L	y as it now/appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L 16000 196 0 47</u> .	were filed on 10/24/2016 and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty 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)  B. If amending the registered agent and/or registered offregistered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	City , Florida City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is

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 = A	uthorized Member		
Title	<u>Name</u>	Address	Type of Action
MGR	Chesson, Phihlip G.	146 Zwd Street N, St Petersburg,	□ Add 50:te G-310 FL 33701 Decemove
MGR	Nahakama, LLC	1471 Noell Bluft Palm Harbor, F	□ Change 1471 Noell Blua =L 34683 □ Xád
	615000 119752		☐ Remove
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Page 3 of 3

Filing Fee: \$25.00