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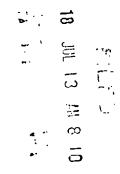
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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S. PRATHER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Chych Name of Lim	Street Defut ited Liability Company	66C
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	TP	Rame of Person	
		Name of Person	
	To	Sefa V Colmany	an f. A.
		Be (cher S)	
		Address A	3377/
	Toeler E-mail address: (Gity/State and Zip Code WAN AU FIR W to be used for future annual report notif	3377/ 1 County (Corne
For further information c	oncerning this matter, please ca	·	v.
η .	-	at (ZZ) Saytime Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
	☐ \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co.) (A Florida Limited Liability Co.)	eT JOHY L. mpany as it now appears on o ted Liability Company)	ur records.)			
The Articles of Organization for this Limited Liability Comp. Florida document number <u>(16 000 7076</u> 0	any were filed on	1/14/1	<u>'6</u> a	nd assi	igned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited I	trobetus	LCC tion "LLC" or the	ıbbreviat	ion "L.!	L.C."
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·		———	
(Principal office address MUST BE A STREET ADDRESS	2		wi-	<u></u>	
Enter new mailing address, if applicable:			<u>:</u>	13	
Mailing address MAY BE A POST OFFICE BOX			. ,	_ 	
			- ; ;		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l		records, ente	r the n	ame o	of the nev
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida str	eet address			
		, Florida _			
	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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			
			Remove
			□ Change
			Add
			□ Remove
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fan effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days. Note: If the date inserted in this block does not meet the applicable statutory filing requirements	optional) after filing.) Purs , this date will (suant to 60. not be list	5.0207 ted as t
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Effective date, if other than the date of filing: fan effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:0. The 90th day after the record is filed. Signature of a member or authorized representative of a member.	after filing.) Purs	not be list	ied as i

Page 3 of 3

Filing Fee: \$25.00