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S. WARREN JUL 1 4 2017

COVER LETTER

	egistration Section ivision of Corporations	a ´	•
SUBJECT	: TIMOTI'S SCAFCOD SHAK I	II, LL	<u>C</u>
The enclos	ed Articles of Amendment and fee(s) are submitted for filing.		
Please retu	m all correspondence concerning this matter to the following:		
	TIM POYNTER Name of Person		
	Firm/Company		
	3967 1st Ave Address		
	FORNHUDINH BEACH FI 3 City/State and Zib Code TPOUNTER & GENALL COM F-mail address: (to be used for future annual report no	2034	1
	TPOUNTER & GMAIL. COM F-mail address: (to be used for future annual report no	otilication)	
For further	information concerning this matter, please call:		
	Name of Person Area Code Dayti	<u>- (o 5 3</u> ime Telephone	Number
Enclosed is	a check for the following amount:		
\$25.00	Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$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 C (A Florida Lin	CD SHAK III ompany as it now appears on our r inted Liability Company)	f
The Articles of Organization for this Limited Liability Com	pany were filed on 12/10	12016 and assigned
Florida document number $L/\omega O(x) 227\omega 9$.		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation	"L.I.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>S)</u>	···
Enter new mailing address, if applicable: (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		cords, enter the name of the new
Name of New Registered Agent:		. 1375
New Registered Office Address:	Enter Florida street a	ddress
		_, Florida
N. D. C. La de C. L. Marie C. L. C. C. L. C.	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, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Timothy M. Poynter	3967 First Avenue	
		Fernandina Beach, FL 32034	□ Remove
			■ Change
MGR	Theresa K. Poynter	3967 First Avenue	
		Fernandina Beach, FL 32034	□ Remove
			Change
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Filing Fee: \$25.00