## 117000002885

(Re	questor's Name)	
(Ād	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	1
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

	Registration S Division of Co			
SUBJEC		RTNERS LLC		
SUBJEC	·1:	Name of Lim	ited Liability Company	
The enclo	osed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all corresp	ondence concerning this matter	to the following:	
		MIRTHA VALDES MAR	TIN CPA	
			Name of Person	
			Firm/Company	
		420 SOUTH COUNTRY	CLUB ROAD	
			Address	
		LAKE MARY FL 32746		
			City/State and Zip Code	<del>-</del> -
		mvmcpa@juno.com		
		E-mail address: (	to be used for future annual report notif	ication)
For furthe	er information	concerning this matter, please ca	all:	
MIRTHA	A VALDES M.	ARTIN CPA	407 321-3554 at ()	
	Name	of Person	Area Code Daytime	Telephone Number
		the 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:

TO:

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

Liability Company as it now apported the Florida Limited Liability Company	ears on our records.)	
ility Company were filed on _	JANUARY 4, 2017	and assigne
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ls "Limited Liability Company," the	e designation "LLC" or t	the abbreviation "L.L.C."
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171101		
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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 =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JACK GIREM	1194 TADSWORTH TERRACE	■ Add
		LAKE MARY FL 32746	Remove
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