L17000017251

| (Requestor's Name) |
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| | Registration S Division of Co | | | |
|---|----------------------------------|---|---|---|
| eun ire | | ROW SEAT LLC | | |
| SUBJEC | .1: | Name of Lin | ned Liability Company | ····· |
| The enclo | osed Articles of | f Amendment and fee(s) are sub | mitted for filing. | |
| Please re | turn all corresp | ondence concerning this matter | to the following: | |
| | | Melody Lankford, Esq. | | |
| | | | Name of Person | |
| | | Lankford Law Firm, PA | | |
| | | | Firm/Company | |
| | | 140 South Beach Street | Suite 310 | |
| Address | | | | |
| | | Daytona Beach, FL 321 | 4 | |
| | | | City/State and Zip Code | |
| | | mlankford@lankfordlawfi | | |
| For furth | er information | n-mail address; (concerning this matter, please c | o be used for future annual report notification. | n) |
| Melody | Lankford | | 850 264-7004 | |
| | Name | of Person | Area Code Daytime Tele | phone Number |
| Enclosed | is a check for t | the following amount: | | |
| ■ \$25.0 | 00 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 Addre | | Street Address: | |
| Registration Section Division of Corporations | | | Registration Section Division of Corpora | |
| | P.O. Box 632 | 27 | The Centre of Tallal | nassee |
| | Tallahassee, | FL 32314 | 2415 N. Monroe Str | eet, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| SECTION ROW SEAT LLC | | , |
|--|--|--|
| (<u>Name of the Limited Liabili</u> (A Florida | ty Company as it now appears on or Limited Liability Company) | ir records.) |
| The Articles of Organization for this Limited Liability C Florida document number <u>L17000017251</u> | Company were filed on 1/22/17 | andmasigned |
| This amendment is submitted to amend the following: | | 1.39 1.0944 1.0944 |
| A. If amending name, enter the new name of the limit | ited liability company here: | 12 THE STATE OF TH |
| The new name must be distinguishable and contain the words "Lim | ited Liability Company," the designat | ion "L.L.C" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDR | RESS) | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: | d office address on our records | s, enter the name of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| - | Enter Florida stre | et address |
| | | , Florida |
| | City | Zip Code |

New Registered Agent's Signature, if changing Registered Agent:

OCOTION DOMESTATILIO

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 |
|--------------|---------------------|------------------------|----------------|
| AMBR | Alva Gregory Bowman | 1193 SIESTA KEY CIRCLE | ≣ Add |
| | | PORT ORANGE, FL 32128 | □ Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
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| | | | □ Channa |

| Note: | tive date, if other than the date of filing: |
|---------------------|---|
| ie reco ord is f | and specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed. |
| Datec | 1_7/15/20 |
| | |
| | |
| | Signature of a member or authorized representative of a member |

Filing Fee: \$25.00