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| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | isiness Entity Nar | me)         |
| (Do                     | ocument Number)    | )           |
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### **COVER LETTER**

| TO: Registration Section<br>Division of Corporat |   |   |  |
|--|---|---|--|
| SUBJECT: 448                                     | Mar Le  | ited Liability Company  |  |
|  |   | ·····,  |  |
| The enclosed Articles of Amer                    | ndment and fee(s) are sub                     | mitted for filing.  |  |
| Please return all correspondence                 | ce concerning this matter                     | to the following:   |  |
| _  | Michael                                       | Name of Person  |  |
| _  | 448 Mar                                       | Thet mall (   | <del></del>  |
| _  | 955 00  | iange Aue #   | 170  |
| <u> </u>   | Doytong be                                    | City/State and Zip Code   | 114  |
|  | F-mail address: t                             | to be used for future annual report notific                         | ation)   |
| For further information concer                   |   | ·   | account,   |
| Michael Day<br>Name of Pers                      | <u>e</u>                                      | at (356) 631 ()   | S S S S S S S S S S S S S S S S S S S  |
| Enclosed is a check for the foll                 | lowing amount:                                |   |  |
| \$25.00 Filing Fee                               | \$30.00 Filing Fee &<br>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, F1, 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

|  | ТО  | •                                  |
|--|---|------------------------------------|
| ARTIC  | CLES OF ORGANIZATION  |                                    |
|  | OF  | 2017000                            |
| 448 Mar  | 12 15   | 25 AKII.                           |
|  |   |                                    |
| ( <u>Name of the Limited</u>   | Liability Company as it now appears on our re<br>A Florida Limited Liability Company) | 2017 OCT 25 AKII: 12               |
| The Articles of Organization for this Limited Lia  | bility Company were filed on  | O /17 and assigned                 |
| Florida document number $4.17000023$   | 306   | <i>/</i> ·                         |
| This amendment is submitted to amend the follow  | ving:   |                                    |
| A. If amending name, enter the new name of t   | the limited liability company here:   |                                    |
| The new name must be distinguishable and contain the wor                                   | rds "Limited Liability Company." the designation                                      | "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applical   | ble:  |                                    |
| (Principal office address MUST BE A STREET   | 'ADDRESS)   |                                    |
|  |   |                                    |
| Enter new mailing address, if applicable:  |   |                                    |
| (Mailing address MAY BE A POST OFFICE B  | <u> </u>  |                                    |
|  |   |                                    |
| B. If amending the registered agent and/or registered agent and/or the new registered offi |   | ords, enter the name of the new    |
| Name of New Registered Agent:  |   |                                    |
| New Registered Office Address:   | Enter Florida street ac   | ddress                             |
|  |   |                                    |
|  | City  | , Florida Zio 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 = Authorized Member 933 Wild ternational Speducy Type of Action **Title Address** Name | Oliver Dos ☐ Change □ Add ☐ Remove ☐ Change 二 二 二 D. Change 🗖 Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove □ Change

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| Note: If the | date, if other than the date is listed, the date inserted in this is effective date on the | block does r   | iot meet the a | pplicable stati | Tiling or more the story filing req | (optionan 90 days after<br>uirements, this | onal)<br>filing.) Pursuant to<br>date will not be | o 605,0207 (<br>: listed as tl |
|              | l specifies a delaye<br>th day after the re  |                |                | t not an eff    | ective time                         | , at 12:01 a                               | i.m. on the e                                     | arlier of:                     |
| Dated        | 10/23/17   |                |                |                 |                                     |  |   |                                |
| 2            | Æ2   | Signature      | ova member or  | authorized repr | resentative of a                    | member                                     | <u>.</u>  | _                              |
|              | Michael  | 1              | Daye           |                 |                                     |  |   |                                |

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Filing Fee: \$25.00