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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: STRAI	Name of Lim	LC lited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	dence concerning this matter	to the following:	
	KENNETH	Dullocs Name of Person	
		Firm/Company	
	4211 WESBER	Address	
	SARASOTA. FL	34232 City/State and Zip Code	
	E-mail address:	to be used for future annual report notifi	cation)
For further information co	ncerning this matter, please ca	all:	
KENNETH D	V Berson	at (941) 879 - 5 Area Code Daytime	Telephone Number
Enclosed is a check for the	e following amount:		
\$25.00 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 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 Company A Florida Limited Lia	as it now appears on our bility Company)	records.)			
The Articles of Organization for this Limited Lia	bility Company w	ere filed on UAN 31	,2017	and assig	gned	
Florida document number <u>L1700002456</u> 3	<u>. </u> .					
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	the limited liabili	ty company here:				
The new name must be distinguishable and contain the wor	rds "Limited Liability	Company," the designation	n "LLC" or the abbrev	iation "L.L	C."	
Enter new principal offices address, if applical	ble:					
(Principal office address MUST BE A STREET	ADDRESS)					
			<u></u>			
Enter new mailing address, if applicable:	_		3.	****		
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u> .	······································	. jin	7 A	, 	
			د میسد دند و در میار مورد	<i>></i> ŏ	*i 	
			(2) 전 [편] [편]	£- ;		•
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered offic ce address here:	ce address on our re	ecords, enter the		fithe n	<u>ew</u>
				E		
Name of New Registered Agent:	KENNETH	DUGOTS				
New Registered Office Address:						
		Enter Florida street	address			
			, Florida	ip Code		
		City	Z	ıp 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.

f Changing Resistered 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 = N $AMBR = A$	Ianager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	KENNETH DUBOIS	4211 WEBBER ST SAMSORA FC 34232	🗹 Add
			☐ Remove
			Change
AMBIR	KENNETH DUBOS	GRASORA FL 34232	☐ Add
			☐ Remove
			☐ Change
			□ Add
			Remove
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ective date, if other than the date of filing:	(optional)	
n effective date is listed, the date must be specific and cannot be prior to date of filing of the: If the date inserted in this block does not meet the applicable statutory for the date inserted in this block does not meet the applicable statutory for the date inserted in this block does not meet the applicable statutory for the date inserted in this block does not meet the applicable statutory for the date inserted in this block does not meet the applicable statutory for the date in the dat	or more than 90 days after fiting.) Filling requirements, this date w	ill not be list
cument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effective factoring for the record is filed.	ve time, at 12:01 a.m. or	n the earli
ted APRIC 2, ZO17.		
1/2NX/C		
Signature of a member or authorized representa	ative of a member	

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Filing Fee: \$25.00