V17000033795

Office Use Only



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COVER LETTER .

TO: Registration So Division of Con			
SUBJECT:	Janina Name of Lim	Rogan LCC.	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Janin	Name of Person	
		ra Rogar LC Firm/Company	
	1271 Sing	er Drie	<u>e</u>
	Singer Is	City/State and Zip Code Togan @ com(a) to be used for future annual report notifi	124
	Pmail address: (105an @ com(a)	cation)
For further information of	concerning this matter, please ca	-	
Janing Name o	Rogan of Person	at (Sel) 444 Area Code Daytime	- 2258 Telephone Number
Enclosed is a check for the	he 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	ogan LLC y acht now appears on our records.) ability Company)		
The Articles of Organization for this Limited Liability Company we Florida document number <u>L 17000 33 795</u> .	were filed on $\frac{2/13/1}{}$	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	ity company here:		
Save			
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	Same		
(Principal office address MUST BE A STREET ADDRESS)		7	
		ARC B	
		\$ 22 Prints	
Enter new mailing address, if applicable:	Same		
(Mailing address MAY BE A POST OFFICE BOX)			
		— □	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		enter the name of the no	
Name of New Registered Agent:	Same		
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
N. D. Sandana O. Characa and D. Caraca	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a	erformance of my duties, and I ovided for in Chapter 605, F.S	am familiar with and S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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 = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Janina Rogan	1271 Singer Drive Singer Island FL 334	Add □ Remove
			Change
AMBIR	Janina Rogan	1271 Singer Drive	t <u>a</u> Add
	V	1271 Singer Drive Singer Island F2 33	Yoy □ Remove
			Change
			☐ Remove
			Change
		·	□ Add
			Remove
			☐ Change
			Remove
			Change
			Add
			□ Remove
			Change

		Ja	nina	R	og.an	Needs	to	be	the
	Autho	rized	Person		land	Man	ager	o f	the
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ective	date, if oth	her than th	e date of filing	g:	7-21-1	7	(optio	onal)	
<u>te:</u> If	the date inse	rted in this	ust be specific and block does not n Department of S	neet the ap	oplicable statut	iling or more than tory filing requi	90 days after rements, this	filing.) Purs date will r	uant to 60 not be list
umen	(S effective	uate on the	Department of 3	state 3 lect	Jids.				
			ed effective decord is filed.	late, bu	t not an effe	ective time, a	at 12:01 a	ı.m. on tl	he earli
110 5	ocii day ai	cer ene re	cord is filed.						
ed	<i>ð</i> .	91	<u> </u>	90	17.				
	. 🗸		Signature of a i	AY) / (0. 91 = 1	A			
	<u>-</u>		Signature of a i	menhber or	authorized repro	esentative of a me	mber		
				-	_				

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Filing Fee: \$25.00