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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 2017 Birch Street LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sara Decker Name of Person
2017 Birch Street LLC Firm/Company
14323 Birch Street Address
Hudson, FL 34667 City/State and Zip Code Sdecker@decker-group.com E-mail address: (to be used for future annual report/notification)
E-mail address: (to be used for future annual report/notification)
For further information concerning this matter, please call:
E-mail address: (to be used for future annual report/notification) For further information concerning this matter, please call: Cara becker
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\sqrt{2} \\$30.00 Filing Fee & \$\sqrt{2} \\$55.00 Filing Fee & \$\sqrt{2} \\$5

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 ARTICLES OF ORGANIZATION **OF**

2017 Birch S (Name of the Limited Liability Comp. (A Florida Limited	Street LLC pany as it now appears on our record d Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L 17000 3550</u> 3		2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia $\mathcal{N} / \mathcal{A}$		
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1, , 1	<u>.</u>
(Principal office address MUST BE A STREET ADDRESS)	N/A	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	ZIII MAR - 6 A 10: SECKETHAT OF STA
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		s, enter the 12me of the new
Name of New Registered Agent:	NJA	
New Registered Office Address:	Enter Florida street addres	ss
		orida
New Degistered Agent's Signature if changing Degistered Agent	City	Zip Code

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:

<u>Title</u>	authorized Member <u>Name</u>	<u>Address</u>	Type of Action
			_
		14323 Birch Street Hudson, FL 34667	Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change
		SECRETARY OF STATE ALLAHASSEE. FLORI	BAdd n
120.01		Rich A	Add
			□ Remove
			Change
			□ Add
			_□ Remove
			Change

. If amending any other information, enter change(s) here: (Attach additional sheets, ij	necesso	ry.)	
When we (I) filed I inadvertently			
When we (I) filed, I inadvertently left myself off the Article IV section of persons authorized to Manage,			
Section of persons authorized to			
Manage,			···
	 		
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	To The	D	<u> </u>
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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	optiona after filin s, this dat	g.) Pursu	ant to 605.0207 of be listed as
the record specifies a delayed effective date, but not an effective time, at 12:) The 90th day after the record is filed.	01 a.m	. on th	e earlier of
Dated Feb 28, 2017. Signeture of a member or authorized representative of a member			
Sava Dedler Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00