## L17000036475

(Re	equestor's Name)	
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SECRETARY OF STATE
SECRETARY OF STATE

D. SCOTT MAR . 3 2017

## **COVER LETTER**

то:	Registration Sec Division of Corp		•	•
CUDIE		etievers, LLC		
«SUBJEC	-I: <u></u>	Name of Limited	Liability Company	
		Amendment and fee(s) are submitted and feection are submitted and feection and feection are submitted as the submitted and feection are submitted as the feet feet and feection are submitted as the feet feet feet feet feet feet feet	-	
		Sarina Tenan		
			Name of Person	
		Key Lime Retievers, LLC		
			Firm/Company	<del></del>
		17224 Key Lime BLVD		
			Address	
		Loxahatchee, Fl 33470		======================================
			City/State and Zip Code	三
		sarinamoss@hotmail.com  E-mail address: (to be	e used for future annual report notification	
For furth	er information co	oncerning this matter, please call:		
Sarina 7	enan		432 3499413 at ( )	- 100 S
	Name of	Person	Area Code Daytime Telep	hone Number
Enclosed	is a check for th	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

Key Lime Retievers, LLC		
(Name of the Limited (A	Liability Company as it now appears on our records. Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	oility Company were filed on 2/15/2017	and assigned
Florida document number L17000036475	·	
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	he limited liability company here:	
Key Lime Retrievers, LLC		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ele:	
(Principal office address MUST BE A STREET	ADDRESS)	
	<del></del>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
		-is -i
		F0 _
B. If amending the registered agent and/or	registered office address on our records,	enter the name of the ne
registered agent and/or the new registered offic		255 人 [
Name of New Registered Agent:		
		01:4:3
New Registered Office Address:	Enter Florida street address	<u> </u>
	Litter 1 to that sir eet duaress	
	, Flor	rida
	City	Zıp Coae

## 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			
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
		<del></del>	Change
			Add
			□ Remove
			☐ Change
<del> </del>			Add
			_□ Remove
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			Remove
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			⊖ 3 ⊖ Change
			□ Add
		<del> </del>	□ Remove
			☐ Change

D. If amending	any other information, enter change(s) here: (Attach additional sheets, if nece	essary.)
<del> </del>		
(If an effective d Note: If the o	te, if other than the date of filing:	filing.) Pursuant to 605.0207 (3)(b
	pecifies a delayed effective date, but not an effective time, at $12:01\ a$ day after the record is filed.	a.m. on the earlier of:
Dated Februa	2017	
_(	Signature of a member or authorized representative of a member	2 RED
Sa	urina Tenan	3 36 100000
_	Typed or printed name of signee	

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Filing Fee: \$25.00