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COVER LETTER

TO:	Registration Se Division of Cor		~				
	Frantal C	Strangth Dortners 11.C					
SUBJECT: Fractal Strength Partners, LLC Name of Limited Liability Company							
Country Company							
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please r	return all correspo	ndence concerning this matter	to the following:				
		Renee Barr					
			Name of Person				
Grevstone S		ervices LLC	-				
			Firm/Company				
7000 O D							
7609 Greystone Drive Address							
		Bayonet Po	pint, FL 34667				
			City/State and Zip Code				
			pitalmanagementserviceson to be used for future annual report not				
For furt	ther information c	oncerning this matter, please ca	·				
, 0, 1,		oner, preuse ex	••••				
Ren	ee Barry		at (727) 862-1718				
	Name o	f Person	Area Code Daytin	ne Telephone Number			
Enclose	ed is a check for the	ne following amount:					
⊠ \$25	5,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee. Certificate of Statu			
		Certificate of Status	(additional copy is enclosed)	Certified Copy tadditional copy is encli			
	31 4 F F	ING ADDRESS:	STREET/COUR	IED ANNDESS.			
Registration Section Division of Corporations		Registration Section					
		Division of Corpo	rations				

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fractal Strength Partners, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 02/17/2017 and ass Florida document number L17000038833 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.I 7609 Greystone Drive, #325 Enter new principal offices address, if applicable: Bayonet Point, FL 34667 (Principal office address MUST BE A STREET ADDRESS) 7609 Greystone Drive, #325 Enter new mailing address, if applicable: Bayonet Point, FL 34667 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name o registered agent and/or the new registered office address here: Registered Agent Pros. LLC Name of New Registered Agent: 7609 Greystone Drive New Registered Office Address: Enter Florida street address , Florida <u>3466</u>7 **Bayonet Point**

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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this documbeing 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 Registered Agent, Signature of Fow Registered Agent

Cuy

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of
MGR	William C. Kern	10100 Cypress Cove Drive, Apt 135	
		Fort Myers, FL 33908	☑ Кеп
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Effective date, if other than the date if an effective date is listed, the date must be a Note: If the date inserted in this block of document's effective date on the Depart	pecific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 does not meet the applicable statutory filing requirements, this date will not be listed that the filing is records.
ne record specifies a delayed eff The 90th day after the record	fective date, but not an effective time, at 12:01 a.m. on the earlied is filed.
Dated September 15	2019
Son W.	ten
Sign	ature of a member or authorized representative of a member
	Scott W. Kern
	Typed or printed name of signee
	Page 3 of 3

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Filing Fee: \$25.00