

Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

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Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FLTX HOLDINGS LLC**

Certificate of Status	0
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MAY 08 2017

Electronic Filing Menu

Corporate Filing Menu

YULKER

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5/5/2017

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FLTX HOLDINGS 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 MARCH 7, 2017 and assigned
Florida document number L17000053540.

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.L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(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 of the new
registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

Zip 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.

If Changing Registered Agent, Signature of New Registered Agent

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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

Title	Name	Address	Type of Action
MGR	CONEY, ANDREW	12555 NORTH CENTRAL EXPRI	<input type="checkbox"/> Add
		DALLAS, TX 75243	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SWINE THE FRENCHIE LLC	6505 MALCOLM DRIVE	<input type="checkbox"/> Add
		DALLAS, TX 75214	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CHUNK LLC	1201 ORANGE STREET STE 600	<input type="checkbox"/> Add
		WILMINGTON, DE 19801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 MAY -5 AM 2017
FILED

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