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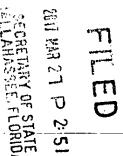
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CHID	IECT.	MERMAC,	LLC		• • • • • • • • • • • • • • • • • • •
SUB	JECT:		Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The e	enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Pleas	se return	all correspo	ndence concerning this matter	to the following:	
			Virginia G Meredith		
				Name of Person	.
			MERMAC, LLC		
				Firm/Company	
			4119 Sun 'n Lake Blvd.		
				Address	
			Sebring, FL 33872		
			_ 	City/State and Zip Code	
			jennerm@earthlink.net		
			E-mail address: (to be used for future annual report notific	cation)
For fi	urther ir	iformation co	oncerning this matter, please ca	all:	
Jenn	er "Virg	inia" Meredi	ith	863 381-0872 at ()	
		Name of	Person	Area Code Daytime	Telephone Number
Enclo	osed is a	check for th	e following amount:		
⊒ \$	525.00 F	iling 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:

ι,

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

MERMAC, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our la Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability C Florida document number $\frac{L17000055533}{L17000055533}$	Company were filed on March 9, 20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited 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 ADD	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:		cords, enter the name of the nev
New Registered Office Address:	Enter Florida street	address
		_, Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registere	ed Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and a accept the obligations of my position as registered a being filed to merely reflect a change in the registered company has been notified in writing of this change.	complete performance of my duti gent as provided for in Chapter ed office address, I hereby confir	es, and I am familiar with and 605, F.S. Or, if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Age

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>	<u>Address</u>	Type of Action
Officer/ Director	James M Gervasi	4119 Sun 'n Lake Blvd	
		Sebring, FL	□ Remove
		33872	E Change
SH	Tracy King-MacCornack	810 East Canfield Street	
		Avon Park, FL	■ Remove
		33825	□ Change
			Add
			Remove
			☐ Change
			□ Remove
			☐ Change
			Remove Remove Remove Remove
			•
		yar t	□ Change

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fective date, if other than th	e date of filing:	(optional)
n effective date is listed, the date mote: If the date inserted in this becument's effective date on the I	e date of filing: ast be specific and cannot be prior to date of filing or block does not meet the applicable statutory fil Department of State's records.	r more than 90 days after filing.) Pursuant to 605.0 ling requirements, this date will not be listed
	ed effective date, but not an effective cord is filed.	e time, at 12:01 a.m. on the earlier
The 90th day after the re		e time, at 12:01 a.m. on the earlier
The 90th day after the re	cord is filed.	
The 90th day after the re	2017	ive of a member
ted March 23 Uginia	2017	ive of a member
ted March 23 Uginia	Signature of a member or authorized representation. Typed or printed name of signee	ive of a member
The 90th day after the rested March 23	2017 , 2017 Signature of a member or authorized representation	ive of a member