# 117000059127

	(Requestor's Name)	
	(Address)	
<del></del>	(Address)	
	,	
	(ChalChata Pia IDhana th	
	(City/State/Zip/Phone #)	
	P   WAIT	MAIL
L PICK-U	P U WAII	LI WAIL
	(Business Entity Name)	
(Document Number)		
	(2200)	
a ve ta i	o de la companya de l	•
Certified Copies	Certificates of	Status
Special Instruction	s to Filing Officer:	
·	~	
1		

Office Use Only



800315783648

07/17/18--01005--016 \*\*60.00

RECEIVED
JUL 1 6 2018

FILED

18 JUL 16 PM 2:5

SECRETARY OF STATE

# **COVER LETTER**

TO:	Registration Sec Division of Corp			
SUBJE	ct: DIR	Ly 2 Clears Lh C	ited Liability Company	
The enc	losed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspor	ndence concerning this matter	to the following:	
		Miche	Sur Staun Name of Person	
		PROCHANS FI	ANTIP LLC Firm Company	
		216 WAL NO	Lt AVE. (FORMER.)	lj <u>inge Ave Lo</u> nguccol F13279)
		Orange (	Ly F1. 327	<u>43</u>
		PacClECULLC E-mail address: (1	City State and Zip Code  OGNAIL, CHM  to be used for future annual report notif	Teation)
For fyrtl	her information co	oncerning this matter, please ca	all:	
4	i Chelli Name of	Braux Person	at <u>321</u> , <u>228-3</u> Area Code Daytima	304.3 Telephone Number
	)		,	·
Enclose	d is a check for th	e following amount:		
<b>□ \$</b> 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

The Articles of Organization for this Limited Liability Company were filed on 9.14.2017and assigned Florida document number <u>L17000059137</u> 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 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 Cin

### 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
		<del></del>	Change
			Add
			☐ Remove
			□ Change
			Add
			Remove
			SECRETARY OF STA
			LORIO CRemove
			☐ Change
			Add
			Remove
			☐ Change
			☐ Add
			☐ Remove
			Change

	- CT 2
	5
7 12.2010	
Effective date, if other than the date of filing: \(\frac{7.73.20/8}{20.0000}\) If an effective date is listed, the date must be specific and cannot be prior to date of filing or more that \(\frac{Note:}{20.0000}\) Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective time, The 90th day after the record is filed.	at 12:01 a.m. on the earlier of:
Dated 7.13.7018	
Signature of a member or authorized representative of a m	nember
Michelle BRAUN	

Page 3 of 3

Filing Fee: \$25.00