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TO MAY -7 AM 6: TE

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COVER LETTER

TO: Registration Se Division of Cor	
SUBJECT: LE	PAN MACHINE LLC Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ndence concerning this matter to the following:
	Brenda Sanchez Name of Person LEAN MACHINE LCC Firm/Company 125 EMERRITT ISLANDSWY STE 107#40 Address MERRITT ISLANDSWY STE 107#40 City/State and Zip Code Brenda D 321 FATLOSS OM E-mail address: (to be used for future annual report notification)
For further information co	oncerning this matter, please call:
Brenda Name o	Sanche Z at 321 424-020 Z Person Area Code Daytime Telephone Number
Enclosed is a check for the	ne following amount:
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LEAN MACHINE LCC
(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 $\frac{4-2717}{4-2717}$ and assigned Florida document number $\frac{2700093709}{4-2717}$.
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: 125 E Merritt ISCAND CSWY
(Principal office address MUST BE A STREET ADDRESS) SUITE 107, # 404 MERRITT ISLAND, FL 32952
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) SUITE 107, FT 484 Merritt island CSWY Merritt island, FC 32952
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: 125 E MEKRITT ISLAND CSWY, 187 #484 Enter Florida street address Merritt Island, Florida B295 2 City Zip Code
Merritt Island, Florida B2952 City 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

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 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 **Address Title** Name **Type of Action** JULIE LALONDE 125 & Merritt island only Add suite 107, to 404, were the risland, ☐ Remove ☐ Change _□ Add □ Remove ☐ Change ☐ Remove _□ Change _□ Add _□ Remove _□ Change □ Add □ Remove _□ Change □ Add □ Remove

☐ Change

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	6	TIONS
ffective date, if other than the date of filing:	rsuant to 605.020 I not be listed a)7 (3)(b) is the
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on The 90th day after the record is filed.	the earlier o	of:
ated $\frac{MAY}{2018}$.		
Signature of a member or authorized representative of a member		
TIN 16 / 1 × 2106		

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Filing Fee: \$25.00