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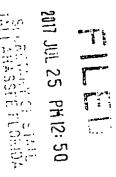
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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COVER LETTER

то:		ition Secti of Corpo							
SUBJI	ECT:	NOT	HIN_	Name of Limit	ed Libbility Con	apany C			
The en	closed Art	icles of Ar	nendment and f	ec(s) are subm	nitted for filing				
Please	return all c	correspond	ence concerning	g this matter to	o the following	::			
			JA	MIE	Name of F	1 LL 1 Person	N		
			<u> </u>	thin	Firm/Con	արակչ)	170		
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Esse fine	alver in then	nation con	t:-n cerning this mat		be used for futi	irejannual rep	iori notification	1)	
			Layh	C C	at $(\frac{5}{6})$	Civile	136 - Daytime Telep	5798	-
Enclos	ed is a che	ck for the I	ollowing amou	nt:					
□ \$2	5,00 Filing	Fee ,	S30.00 Filin Certificate		S55,00 Fi Certified (additional			S60,00 Filing Fe Certificate of S Certified Copy (additional copy is	tatus &
		Registration of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, F1, 32314			Registratior Division of Clifton Buil	Corporations ding tive Center C		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF |

Nothin Fancy, Ll	
(<u>Name of the Limited Lia</u> llilly Compar (A Florida Limited L	y as [t now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number 4170009964	were tiled on <u>D(cy 4,2011</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	20
Principal office address MUST BE A STREET ADDRESS)	
	50 K N p
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	©2. 2
	<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and royided for in Chapter 605, F.S. Or, if this document is
If Chan	ging Registered Agent, Signature of New Registered Agent

	g Authorized Person(s) authorized to n <u>f from our records</u> :	ianage, <u>enter th</u>	e title, name, and address of each person being add
MGR = N AMBR = A	danager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGC	Scan Quillin	1560	rangela Dr. DAN
		Paln	Springs. Fl 3346, 1 Bremove
			☐ Change
Mgr Jamie Quillin	Jamie Quillin	156	Granada Pr. BAND
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D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
E. Effect	ive date, if other than the date of filing:
Note:	factive date is listed, the date must be specific and cannot be prior to date of thing or more than 90 days after filing.) Pursuant to 605,0207 (5), If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
	nem's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The	90th day after the record is filed.
	71 715+ 7017
Dated	- July 21 - 2//1/
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member Signature of a member or authorized representative of a member Signature of a memb
	Milliam Layne St. 23
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	Page 3 of 3
	Filing Fee: \$25.00