

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(··-		
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		İ

Office Use Only



600314509546

08/18/18--01012--002 **25.00

FILED

18 JUL -2 AN 9: 34

SECRETARY OF STATE
SECRETARY OF STATE
ANALYSSEE, FLORIDA

O SIMMONS JUL 0.5 2018

COVER LETTER

T		istration Sect ision of Corpo				
e.	in rezve	Next Gen Cl	assics LLC			
St	JBJECT:		Name of Limi	ted Liability Company		
Tŀ	e enclosed	l Articles of A	mendment and fee(s) are subt	nitted for filing.		
Ple	ease return	all correspond	dence concerning this matter	to the following:		
			Erin Lillard			
				Name of Person		
				Firm Company		
			611 Alicia Rd			
				Address	<u> </u>	
			Lakeland, FL 33801			
				City/State and Zip Code		
		E-mail address: (to be used for future annual report notification)				
Fo	r further ir	iformation cor	neerning this matter, please ca		report nouticatio	(11)
	in Lillard		·		19-8600	
		Name of I	Person Person	Area Code	Daytime Tele	phone Number
Er	iclosed is a	check for the	following amount:			
	\$25,00 F	iling Fee	☐ \$30,00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee Certified Copy (additional copy is en		☐ \$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

Next Gen Classics LLC

(Name of the Limited	Liability Company as it now appears on our records.) Florida Limited Liability Company)	7018. 1918.
The Articles of Organization for this Limited Liabi Florida document number <u>L17000107342</u>	ility Company were filed on 01/2018	ASI ☐ III ASI and assigned COST > COST COST
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	^{1,2}
The new name must be distinguishable and contain the word	s "Limited Liability Company." the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	4 . 6
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	NY)	FILED STATES
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>e</u> e address here:	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
_	Floric	
	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 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

7

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>	Address	Type of Action
MGR	Jeffrey A Bailey	611 Alicia Rd	∃ Add
		Lakeland, FL 33801	☐ Remove
			Change
			Remove
			Change
			
			☐ Remove
			SECRETARY OF STATE Change Change Change Change
			NRY OF THE STREET
			OF Demove
			☐ Change
			□ Remove
			Change
			Remove
			Change

fame		
-		
_		
-		
-		
_		
_		
_	15.6	
_		
_	25 - V	1
_	Eng.	つ
_		
	A STATE OF THE STA	
_		
-		
_		
_		
_		
	6/15/2018	
ffecti	ve date, if other than the date of filing: (optional)	020
	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste	
	ent's effective date on the Department of State's records.	
	ord specifies a delayed effective date, but not an effective time, at $12:01~a.m.$ on the earlie 90 th day after the record is filed.	r o
ated `	June 13 2018	
מונים _	2 01	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00