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2017 JUN 19 AM 10: 56

JUN 2 1 2017 J. HARRIS

COVER LETTER

Division of Corporations
SUBJECT: Splendiferous Properties Jahnvertmath LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Shame of Person
Splendiferous Properties Investment LK
304 Sunset CIR Sate. D
Moult C. G. A. 31768 City/State and Zip Code
E-mail address: (to be used for future annual report not lication)
For further information concerning this matter, please call:
Belinda (Ulen at (229) 891-5226 Name of Person at (229) Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
D \$25.00 Filing Fee

MAILING ADDRESS:

TO:

Registration Section

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**

Spleyd' Fex	OUS FYDEYTIES J. Market Brown as it now appears on our records.)	-Investment:
The Articles of Organization for this Limited Liability Company Florida document number	C [[[[] []]]	DI7and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil the new name must be distinguishable and contain the words "Limited Liabil Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	tments of Sti	DLLC, Streviation "L.L.C." TR STED 31768
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	N/A	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the name of the new
Name of New Registered Agent:	- N/A	.
New Registered Office Address:	Enter Florida street address	
	Florida	
	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

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> Type of Action _□ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add □ Remove ☐ Change _□ Add _□ Remove Change Mayor 56ngg □ Add ☐ Remove

□ Change

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Note: If the di	e, if other than the date on the is listed, the date must be spec ate inserted in this block doc fective date on the Departmo	s not meet the ap	plicable statutory	or more than 90 days filling requirements	optional) after filing.) Pursus this date will no	unt to 605,0207 of be listed as
	pecifies a delayed effection day after the record is		not an effecti	ve time, at 12:0	01 a.m. on the	e earlier of
Dated	6/14/17 Ile		Leans		TALL AHASS	2017 JUN 1 9
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Filing Fee: \$25.00