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D. SCOTT JUL 11 2017



June 19, 2017

NICOLAS ZEHNER 10411 MCINTOSH RD THONOTOSASA, FL 33592

SUBJECT: WASHERS PLUS, LLC Ref. Number: L17000120995

We have received your document for WASHERS PLUS, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being

returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 217A00012358

RECEIVED

ON JUL-3 TH R- 86, SECRETARY OF STATE

TALLAHASSEE. FLORIOM

- ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now (A Florida Limited Liability Con	appears on our records.) opany)
The Articles of Organization for this Limited Liability Company were filed Florida document number <u>L176CC12C995</u> .	on June 34, 2417 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company Port of the new name must be distinguishable and contain the words "Limited Liability Company	
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 here:	ess on our records, <u>enter the name of the new</u>
Name of New Registered Agent:	,
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·
	ter Florida street address
•	, Florida
City	Zip Code

New Register ed Agent's Signature, if changing Register ed 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

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	Signature of	a member of	r authorized repre	esentative o	I a memper		

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Filing Fee: \$25.00