## 117000121062

(F	Requestor's Name)	
(A	Address)	<u>.</u>
(A	Address)	
(C	City/State/Zip/Phone #)	
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

25642 FL LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on our records. Liability Company)	)	,	
The Articles of Organization for this Limited Liability Company		were filed on 06/02/2017	and :	and assigned	
Florida document number L17000121062					
his amendment is submitted to amend the following	llowing:				
A. If amending name, enter the new name	of the limited liab	oility company here:			
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" of	or the abbreviation '	L.L.C."	
Enter new principal offices address, if appli	cable:	······		<u>0</u>	
Principal office address MUST BE A STRE	ET ADDRESS)		<u>ت</u>	VISE SEC	
			<u>_</u>		
			5	FARE CC	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		237 OCEAN BLUFF DRIVE	P	- XX 유다	
		KISSIMMEE, FL 34759	ယ္		
			—— <u>—</u> —————————————————————————————————	O. C.	
3. If amending the registered agent and egistered agent and/or the new registered of			enter the name	e of the	
Name of New Registered Agent:	<del> </del>				
New Registered Office Address:	247 MAITLAN	ID AVE., SUITE 1000			
<del></del>		Enter Florida street address			
	ALTAMONTE	SPRINGS , Flor	ida <u>32701</u>		
		City	Zip Cod	c	

## 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BASSAM F. OUAIDA	247 Maitland Ave., Suite 1000	
		Altamonte Springs, FL 32701	□ Remove
		c/o Miller Johnson Law, P.L.	■ Change
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	9 *	
06/27/2018		
Tective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior to date of filing or mo	(optional) are than 90 days after filling ) Pursuant to 605 03	²()7
te: If the date inserted in this block does not meet the applicable statutory filing	requirements, this date will not be listed	as
cument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effective ti	me, at 12:01 a.m. on the earlier	of
The 90th day after the record is filed.		
ted July 11 2018		
ted		
+ $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$		
Signature of a member or authorized representative of	of a member	