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COVER LETTER

TO:	Registration Sect Division of Corp		,	
SUBJE	CT:	Mark Sheets	Jy UC nited Liability Company	
		mendment and fee(s) are sub dence concerning this matter	-	
			_	
		M and	Name of Person K Sheets Jr UC Firm/Company	
		(0449	127th Ave	
			City/State and Zip Code	
For furth	ner information cor	E-mail address: (to be used for future annual report noti	fication)
	May LSI Name of I	rerson error	at (<u>727</u>) <u>439</u> 4 Area Code Daytime	228 e Telephone Number
Enclosed	I is a check for the	following amount:		
X \$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mark Shee	to Tr ILC
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L170∞142077</u> .	were filed on $\frac{Ob/35/2017}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liahi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	10449 1277h Ave
(Principal office address MUST BE A STREET ADDRESS)	1 AV 951 AV 33773
Enter new mailing address, if applicable:	25 P
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	Marke R Sheets Jr
New Registered Office Address: \\O'	447 127th Ave. Emer Florida street address
	City , Florida 33773

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>	Address	Type of Action
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			Change
			
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<u>vote:</u> H	the date in	serted i	n this blo	ck does no	ing: and cannot be it meet the a f State's rec	pplicable	ne of filing statutory	or more th filing requ	n 90 days at pirements, t	otional) der filing.) Pu his date wil	rsuant to 605.0 I not be listed	0207 (d as t
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