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J. HARRIE

COVER LETTER

TO: Registration S Division of Co			
8280 LLC			
SUBJECT:	Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: JAMES PEARCE Name of Person 8280 LLC Firm/Company 350 JIM MORAN BLVD SUITE 200 Address DEERFIELD BEACH / FLORIDA 33442 City/State and Zip Code 8280@BarefootCapitalGroup.com E-mail address: (to be used for future annual report notification) formation concerning this matter, please call:		
The enclosed Articles o	f Amendment and fee(s) are submi	itted for filing.	
Please return all corresp	ondence concerning this matter to	the following:	
	JAMES PEARCE		
		Name of Person	
	8280 LLC		
		Firm/Company	
	350 JIM MORAN BLVD SU	JITE 200	
		Address	
	DEERFIELD BEACH / FLC	ORIDA 33442	
			
			
For further information			
James Pearce			
Name	of Person	Area Code Daytime Telephone	Number
	☐ \$30.00 Filing Fee &	S55.00 Filing Fee & S6	
MAI	LING ADDRESS:	(additional copy is enclosed)	Certified Copy additional copy is enclosed)
Regi: Divis P.O.	stration Section sion of Corporations Box 6327 thassee, F1. 32314	Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ited Liability Company as it now appears on or (A Florida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Company were filed on 07/17/2017 Torida document number 1.17000152977	
of the limited liability company here:	
words "Limited Liability Company," the designat	tion "LLC" or the abbreviation "L.L.C."
cable:	
ET ADDRESS)	AFRILIAN
	Pr. No pany
	V (i PS)
<u>.</u>	records, enter the name of the no
JAMES PEARCE	
Enter Florida Str	eet address
	, Flo rida
	Illowing: of the limited liability company here: words "Limited Liability Company," the designaticable: ET ADDRESS) EBOX) d/or registered office address on our office address here:

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

Page 1 of 3

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>	<u>Address</u>	Type of Action
MGR	STEVEN UTLEY		Add
			Remove
			Change
MGR	JAMES PEARCE		—————————————————————————————————————
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
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			□ Remove
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ocument's effective date on the Department	artment of State's reco	rus.				
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The 90th day after the recor	d is filed.	not an enectiv	e time, at 12.)		
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09/15/2017		<u></u>			2 . 1,,	\mathcal{O}
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ated	ignature of a member or :	4				SEP 22

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Filing Fee: \$25.00