## L/7000/61886

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## COVER'LETTER

O: Registration Sec Division of Corp		:	1,
uвјест: <u>Ј</u> ట	PONION FERKE-	Deck & Dech	k. 11
he enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
lease return all correspor	ndence concerning this matter to	o the following:	
	James 106 Risgo	1.115	
		Name of Person	
	106 Risser	danel Reli	
		Firm/Company	
		Address	
	Tallahasse	e F/ 3231	12_
		City/State and Zip Code	<del>_</del>
	E-mail address: (t	o be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca		
Namu	f Person	at ()	: Telephone Number
vaine o	1 1 613011		·
Enclosed is a check for the	ha fallowing amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee &	S55.00 Filing Fee &	☐ \$60.00 Filing Fee.
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	ANG ADDRESS:	STREET/COURI	
	ration Section on of Corporations	Registration Section División of Corpo	
P.O. H	lox 6327 assec, FL 32314	Clifton Building 2661 Éxecutive Co	enter Circle
r anan	dooce, Pir Japit	Tallahassee, FL 3	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

17 AUG -2 PM 2:26

(Name of the Limited Liability Company (A Florida Limited Liability Company)	Deale i	Dock-	.,, 2: 26
(Same of the Limited Liability Company (A Florida Limited Li	v as it now appear ability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company v Florida document number 417000161994	vere filed on	Liely 28, 20	267 and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil  Super 125 Pence 126  The new name must be distinguishable and contain the words "Limited Liability Liab	ity company h	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<del></del>	
(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 off registered agent and/or the new registered office address here	fice address o	n our records, <u>ente</u>	r the name of the new
Name of New Registered Agent:	-		
New Registered Office Address:	<u> </u>	lorida street address	
	Enter Fi	, Florida	
	Ciţy	, 1 10) 1011	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

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amending Authorized Person(s) authorized to manage, enter the temoved from our records:  IGR = Manager MBR = Authorized Member			SECRET ISLAND  AUG -2  PM 2: 26  Type of Action
<u>ïtle</u>	<u>Name</u>	Address	Type of Action
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of	(optional)  Tiling or more than 90 days after filing.) Pursuant to 605.0207 (3
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locument's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an ef	fective time, at 12:01 a.m. on the earlier of:
The 90th day after the record is filed.	
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Dated Highest 1, JUIT.	
And the	
Signature of a member or authorized re	presentative of a member
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Filing Fee: \$25.00