## 217000179167

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## **COVER LETTER**

	tegistration Sec Division of Corp					
OHD IEZT		LESKI GROUP LLC				
SUBJEC'	l':	Name of Limi	ted Liability Company			
The enclos	sed Articles of A	Amendment and fee(s) are subt	nitted for filing.			
Please rett	ırn all correspoi	ndence concerning this matter t	to the following:			
		FRANK MOZELEKSI				
			Name of Person			
		THE MOZELESKI GROU	P LLC			
	Firm/Company					
		3125 LITH AVENUE WE	ST			
			Address			
		BRADENTON, FL 34205				
			City/State and Zip Code			
		FMOZELESKI@GMAIL.C		<del></del> _		
		E-mail address: (t	to be used for future annual report notific	cation)		
For furthe	r information co	oncerning this matter, please ca	all:			
FRANK 1	MOZELESKI		941 742-9739 at ( )			
	Name of	Person	at () Area Code Daytime	Telephone Number		
Enclosed	is a check for th	e following amount:				
\$25.0	0 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 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



THE MOZELESKI GROUP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	ompany were filed on AUGUST	and assigned
Florida document number L17000179167	<u></u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u></u>
(Principal office address MUST BE A STREET ADDR	PESS)	
Enter now mailing address: if applicables		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
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TO THE STATE OF TH		
B. If amending the registered agent and/or regist registered agent and/or the new registered office address Name of New Registered Agent:		ecords, enter the name of the new
registered agent and/or the new registered office addr	ress here:	
Name of New Registered Agent:		1 addrexs
Name of New Registered Agent:	ress here:	
Name of New Registered Agent:	ress here:  Enter Florida stree  City	1 addrexs

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
MGR	NATHAN J MOZELESKI	3125 LITH AVENUE WEST	Add
		BRADENTON, FL 34205	■ Remove
			Change
			□ Add
			□ Remove
		<del></del>	Change
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fective date, if other than th	10/03/2017	(07	ational)
n effective date is listed, the date mi	ust be specific and cannot be prior to o	(op date of filing or more than 90 days a	fler filing.) Pursuant to 605.0207
ote: If the date inserted in this because it is to the learning on the learning the learning in the learning i	plock does not meet the applicable Department of State's records.	e statutory filing requirements, (	this date will not be listed as
record specifies a delaye	ed effective date, but not a	in effective time, at 12:0.	1 a.m. on the earlier o
	cord is filed.		
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OCTOBER 3	2017		
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The 90th day after the re	Fiel Mi	ed representative of a member	DIAISION OF 1
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Filing Fee: \$25.00