## 117000214306

(Req	uestor's Name)	<del></del>
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate:	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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November 3, 2017

CHRIA ERICH, ESQ 1514 BROADWAY SUITE 101 FORT MYERS, FL 33901

SUBJECT: THISSHOREBEATSWORK, LLC

Ref. Number: L17000214306

We have received your document for THISSHOREBEATSWORK, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 617A00022339

Dionne M Pijeaux Regulatory Specialist

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ity Company as it now appears on our records.) la Limited Liability Company)	
Company were filed on October 17, 2017	and assigned
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nited liability company here:	
nited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
RESS)	
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stered office address on our records, ento	er the name of the ne
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Enter Florida street address	<u> </u>
	Zip Code
1	stered office address on our records, enteress 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

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>	Name	<u>Address</u>	Type of Action	
			Add	
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THISSHOREBEATSWOR	rK, LLC to			
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Effective date, if other than the	ne date of filing:	(optional)		
(If an effective date is listed, the date m	nust be specific and cannot be prior to dat block does not meet the applicable s	e of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 statutory filing requirements, this date will not be listed as the		
the record specifies a delayon The 90th day after the re		effective time, at 12:01 a.m. on the earlier of:		
Dated October 31	2017			
istace				
//, -				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00