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Office Use Only



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COVER LETTER

Division of Cor	porations		
Economy SUBJECT:	Laboratory LLC		
300at.c1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Frank Earl Hollander		
		Name of Person	
	Economy Laboratory LL	С	
		Firm/Company	
	1954 Dairy Rd		
		Address	
	W Melbourne, Florida 32	2904	
		City/State and Zip Code	
	economylaboratory@gma		
	E-mail address: (to be used for future annual report notif	ication)
For further information e	oncerning this matter, please ca	all:	
Frank Earl Hollander		321 261-9215 at ()	
Name o	f Person		Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$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:

TO:

Registration Section

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

Economy	 -	
	 -	C -1

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

The Articles of Organization for this Limited Li Florida document number L17000214374		were med on		and assig	ned
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the design	ation "LLC" or the abbrevi	ation "L.L.	C."
Enter new principal offices address, if applicable:		1954 Dairy Rd			
(Principal office address MUST BE A STREET ADDRESS)		W Melbourne			the new
		FL 32904		<u>ය</u>	of the new
				× 2	12.5 12.5 12.5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1954 Dairy Rd		7	23.
		W Melbourne		-	
		Florida 32904			<u> </u>
B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent:			r records, enter the	name of	the new
New Registered Office Address:	1954 Dairy Ro	j			
New Neglitered Office Address.	Enter Florida street address				
	W Melbourne		Florida <u>32904</u>		
		City		ip Code	
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered provisions of all statutes relative to the prope	d agent and agreer and complete	ee to act in this capa performance of my		liar with	and ent is

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
AMBR	Audrey Mae Walker	466 Harbor City Blvd	
		Melbourne, FL 32935	■ Remove
			Change
AMBR	Audrey Mae Hollander	1954 Dairy Rd	■ Add
		W Melbourne , FL 32904	□ Remove
			Change
			□ Add
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	tive date, if other than the date of filing: (optional)		
ote:	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursua, If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no		
ocun	nent's effective date on the Department of State's records.		
e re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the	a earli	or o
The	e 90th day after the record is filed.	e Cain	E1 0
ated	4-23-18		
	Signature of a member or authorized representative of a member		
	Significance of a member or authorized representative of a member Frank Earl Hollands Typed or printed name of signee		
	Typed or printed name of signee		

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Filing Fee: \$25.00