(Requestor's Name)	
(Address)	
(Address)	100305118501 11/02/1701015026 ++25.00
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
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	C	OVER LETTER		
FO: Registration Sec				
Division of Corp				
LAKE HUC SUBJECT:	KLEBERRY HOLDINGS, LL	ed Liability Company		
	Name of Linit	eu Elabhity Company		
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.		
Please return all correspor	idence concerning this matter t	o the following:		
	AAMIR WAHEED			
		Name of Person		
	LAKE HUCKLEBERRY F	IOLDINGS, LLC.		
		Firm/Company		I
	2295 S HIAWASSEE RD S	STE 214		
		Address		
	ORLANDO, FL 32835			
	digitrac@gmail.com	City/State and Zip Code		
		o be used for future annual report notifica	ation)	7
For further information co	oncerning this matter, please ca	ill:		د. د. ۹۰ - ۲ - محمد -
AAMIR WAHEED		407 810-7660	·	.
Name o	f Person	at () Area Code Daytime T	elephone Number > $\bar{\Sigma}$	つ '
			co	
Enclosed is a check for th	ne following amount:			:
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle	

ARTICLES OF AN TO	/IENDMIENT
ARTICLES OF OR	GANIZATION
OF	
LAKE HUCKLEBERRY HOLDINGS LLC	
(<u>Name of the Limited Liability Company a</u> (A Florida Limited Liabi	is it now appears on our records.) ility Company)
	c1 10/20/2017 and animad
The Articles of Organization for this Limited Liability Company we	$\frac{10/20/2017}{2000} and assigned$
Florida document number L17000217901	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	y company here:
A. If amending name, <u>enter the new grant of the papers and the</u>	
The new name must be distinguishable and contain the words "Limited Liability (Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
-	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	·: •:2
-	
B. If amending the registered agent and/or registered offic	sa address on our records enter the name of the ne
registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida City 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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGRM	ARMAND F NANNICOLA	2295 S HIAWASSEE RD STE 214	D Add
		ORLANDO, FL 32835	Remove
			Change
			🖸 Add
			🛙 Remove
			Change
			🗆 Add
		<u>;</u>	Remove
			Change
		- 	Remove
			Change
			🗆 Add
			Remove
			Change
		·	🖸 Add
			C Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) •• . · . . ~ 1 --í - J

E. Effective date, if other than the date of filing: 10/20/2017 (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

OCTOBER 30th	2017	
2	SHATTA MARIA	
Ŝı	ature of a member or authorized representative of a member	
AAMIR WAHEED		
······································	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00