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(Req	uestor's Name)	
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PICK-UP	MAIT	MAIL
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Special Instructions to F	iling Officer:	
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COVER LETTER

TO: Registration : Division of Co			
•	•	Joc #	>
CURIOT (A)	111 ~ POS / 1.		0226291
SUBJECT: 400	y Ware POS LL Name of Limi	ited Liability Company	0 3 2 0 1 1
	1 mane or entire	ned Emonity Company	
The enclosed Articles of	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	pondence concerning this matter	to the following:	
	5 : 1/	1 1	
	<u> Janel 4</u>	Name of Person	
		Name of Person	
	Marcho	2111	
	any owner	S CCC Firm/Company	
		тивсопрану	
	32452 Go	Idard Drive	
		Address	" , ,
	,	1 - 2 - 2	
	Wesley C	hapel, FL 335 City/State and Zip Code	43
		City/State and Zip Code	·
	danakur	o be used for future annual report notif	
	E-mail address: (t	o be used for future annual report notif	ication)
For further information	concerning this matter, please ca		
Daniel	Kurland	at (954) 224 Area Code Daytime	- 5074
Name	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for	the following amount:		
KI \$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,
\$25,00 Tilling i ee	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	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

SECRETARY OF SHALLS DIVISION OF CORPORATIONS

18 JUN 28 PM 2: 37

Zip Code

(Name of the Limited Liability Compan (A Florida Limited L.	2: 37
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company of Florida document number	were filed onll/1/17 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	32452 Goldard Drive
(Principal office address MUST BE A STREET ADDRESS)	Wesley Chapel, FL 33543 Esane Address
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	[Sare Aldress]
registered agent and/or the new registered office address here	Florida

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.

Cuy

If Changing Registered Agent, Signature of New Registered Agent

	g Authorized Person(s) authorized to n from our records:	nanage, enter the title, name, and address of each person being	<u>added</u>
MGR = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address Type of Act	
AMGR	Scott Kurland	7746 crescent Palm Drive	
		7746 Crescent Palm Drive Wesley Chapel, FL 33545 Remove	
		Change	
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f an effe Note:	we date, if other than the date of filing: (125)17 (optional) crive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purs of the date inserted in this block does not meet the applicable statutory filing requirements, this date will sent's effective date on the Department of State's records.		
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t 90th day after the record is filed.	he ear	lier of:
Dated _	2018.		
	Signature of a member or authorized representative of a member		

Page 3 of 3

Filing Fee: \$25.00