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236674

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SECRETARY OF STATE FALLAHASSEE, FLORID,

COVERERTTER

TO: Registration Se Division of Cor			
SUBJECT: ToS	ide Oit as	d Cotesina ited Liability Company	ILC
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Troy C	Name of Person	···
		Firm/Company	
	2180 NW	12 Ave	
	Lake Pana	Address Ciny/Situation of Zip Code	33538
		Chyroliae and zap code	
12 - Combon Sections		to be used for future annual report no	tification)
ror further information co	oncerning this matter, please ca		
Troy C	Collins	at (*813) <u>928 -</u> Area Code Dayti	ne Telephone Number
		The code Payer	me retepnone remoci
Enclosed is a check for th	e following amount:		
र्छ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Registra Division P.O. Bo	NG ADDRESS: ntion Section n of Corporations is 6327 ssee, FL 32314	STREET/COUR Registration Sect Division of Corp Cliften Building 2661 Executive C Tallabassee, FL	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company	y were filed on and assigned
Florida document number L 17 000 23 ld 6 34	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
	
The new name must be distinguishable and contain the words "Limited Liab	ality Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	7A X
	L CCR
	TAR ASS
Enter new mailing address, if applicable:	, series
(Mailing address MAY BE A POST OFFICE BOX)	war in
	O. RAI
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.	office address on our records, <u>enter the name of the new</u>
registered agent and/or the new registered office address its	is.
Name of New Registered Agent:	
New Registered Office Address:	
The state of the s	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	provided for in Chapter 605, F.S. Or, if this document is
If Cha	inging Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending a	Authorized Person(s) authorized to man	[he title, name, and address of each	person being added
MGR = Ma		, -		
<u>Title</u>	Name	Address		Type of Action
MGK	Troy C Collins	2180	Panasoffkee FL	Z Add
		Lake	Parasoffkee FL 33538	Remove
			75556	□ Change
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The 90t	h day afte	r the record	is filed.	ŕ			•			
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