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U4/U8/19--U1827--U13 **25.UB

R. WHITE APR 1 5 2019

COVER LETTER

TO: Registration Se Division of Cor			•
SUBJECT:	Cut N Ste	tred Liability Company	
	Amendment and fee(s) are sub	•	
Please return all correspo	ondence concerning this matter	to the following:	
	Mere.	Name of Person	<u> </u>
	- My.	Realton Jour T	Realtur Realty, LLC
	2676	Sw 129 Terrore Address	>
		City/State and Zip Code	
	Myreal+ Ednail address: (to be used for future annual report notifi	Dhotmail.com
For further information c	concerning this matter, please ca	all:	
Meredith Name o	Patterson f Person	at (<u>959</u>) <u>696</u> Area Code Daytime	Telephone Number
Englosed is a check for the	he 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)
MAII	INC ADDRESS:	STREET/COURT	FR ADDRESS:

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Cut N Stule	2019 APR -8 PH 3:57
(Name of the Limited Lia (A Flo	2019 APR - 8 PH 3: 57 bility Company as it now appears on our records.) rida Limited Liability Company) y Company were filed on
Florida document number <u>U700033</u>	<u>8</u> 766
This amendment is submitted to amend the following	:
A. If amending name, enter the new name of the l	imited liability company here:
The new name must be distinguishable and contain the words	Limited Liability Company," the designation "L.L.C."
Enter new principal offices address, if applicable:	2676 SW 129 TECTOR
(Principal office address MUST BE A STREET AD	DRESS) Miscornar Pl. 33007
Enter new mailing address, if applicable:	2676 SW 1299 Terrace
<u>(Mailing address MAY BE A POST OFFICE BOX)</u>	Miramor Fl 33027
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on our records, <u>enter the name of the new ddress here</u> :
Name of New Registered Agent:	
New Registered Office Address:	2676 SW (AG TErsace Enter Florida street address
	Miramac , Florida 33027 City Zip Code
Name Dunishand Agantle Signatura if abancing Davist	ared Arente

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, 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
MGRM	Christopher Patterson	2676 Sw 129 Terrace	
		M: ramer, F1. 33027	Remove
			☐ Change
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Effective date, if other than the date of filing: f an effective date is listed, the date must be specific and cannot be prior to date of filing or more that Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	
ne record specifies a delayed effective date, but not an effective time, The 90th day after the record is filed.	at 12:01 a.m. on the earlier of:
Dated 4 2 . 2019 .	
Signature of a member or authorized representative of a m	nember
Meredith Patterson Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00