1170002441890

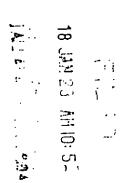
(Reg	uestor's Name)	
(१.७५	u u u u u u u u u u u u u u u u u u u	
(Add	ress)	
(12-1	,	
(Add	ress)	
(City)	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
(Doc	ument Number)
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	

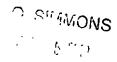
Office Use Only



800307909118

01/23/18--01019--004 **50.00





COVER LETTER

Di	vision of Cor			
SUBJECT		tterprises LLC		
		Name of Limi	ited Liability Company	
The enclose	d Articles of .	Amendment and fee(s) are subt	mitted for filing.	
Please retu	n all correspo	ndence concerning this matter	to the following:	
		John E Anderson		
			Name of Person	 -
		Prospero Enterprises LLC		
		 	Firm/Company	
		212 SW Otter Run Place		
			Address	
		Stuart, FI 34997		
			City/State and Zip Code	
		JohnEdAnderson@gmail.co	om to be used for future annual report notifi	
For further	information co	oncerning this matter, please ca		Cation)
John E And	derson		410 599-5383	
	Name o	f Person	at ()	Telephone Number
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)	□ \$60.00 Filing Fee. Certificate of Status & 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

Propero Enterprises	
(<u>Name of the Limited Li</u> (A F	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabili	
Florida document number L17000244690	
This amendment is submitted to amend the following	g:
A. If amending name, enter the new name of the	limited liability company here:
Prospero Enterprises LLC	
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 AI	DDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	registered office address on our records, enter the name of the new address here:
New Registered Office Address:	
	Enter Florida street address
_	
_	, 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.

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 = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			Change
			□ Remove
			Change
			D'Add
			□ Add Remove
			Change,
			D^Add
			Remove
			□ Change
			□ Add
			□ Remove
			Change
			□ Add
			☐ Remove

		· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·	- 	
			<u>^</u>
			T.
	· · · · · · · · · · · · · · · · · · ·	·	
		· · · · · · · · · · · · · · · · · · ·	
	January 1, 2018		
ective date, if other than the date of filing: effective date is listed, the date must be specific and ca	nnot be prior to date of fili	ng or more than 90 days after t	nat) iling.) Pursuant to 605.02
te: If the date inserted in this block does not me cument's effective date on the Department of Sta		ry filing requirements, this	date will not be listed a
union 5 checive date on the Department of 5th	e o records.		
record specifies a delayed effective da	e, but not an effec	tive time, at 12:01 a.	.m. on the earlier
he 90th day after the record is filed.	,	, ac 22	
D 1 0	2017		
December 8	2017		
01001			
.de Cuill	mber or authorized represe		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00