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COVER LETTER

	istration Sectision of Corp				
CUBINGT	EDEXCO, L				
SUBJECT:		Name of Limi	ited Liability Company		
The enclosed	d Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		ANDREW L. BARAUSKA	AS		
			Name of Person		
	ATTORNEY AT LAW				
			Firm/Company		
		 -	Address		
		JACKSONVILLE BEACH	H, FL 32250		
			City/State and Zip Code		
	andrew@barauskas.com				
		E-mail address: (1	to be used for future annual report notific	cation)	
For further i	nformation co	ncerning this matter, please ca	alt:		
ANDREW	L. BARAUSK	AS	727 688-4014		
	Name of	Person	at () Area Code Daytime	Telephone Number	
Enclosed is	a check for the	: following amount:			
□ \$25.00 H	Filing Fee	S30,00 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

EDEXCO, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L17000250585	were filed on December 7, 2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if applicable:	47 GINGERBREAD LANE	Séi TAL
(Principal office address MUST BE A STREET ADDRESS)	EAST HAMPTON, NY 11937	E AE
		2
Enter new mailing address, if applicable:	P.O. BOX 5090	THAN THE
(Mailing address MAY BE A POST OFFICE BOX)	EAST HAMPTON, NY 11937	<u> </u>
		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		the пате of the new
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, 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
MGR	EDUARD H. vanRAAY	47 GINGERBREAD LANE	⋒ Add
		EAST HAMPTON, NY 11937	□ Remove
			Change
MGR	BETH JOSEPHS	47 GINGERBREAD LANE	
		EAST HAMPTON, NY 11937	≅ Remove
			☐ Change
			☐ Remove
			Change
			Add
			Remove
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ectiv	December 7, 2017 e date, if other than the date of filing:	
ı effec	live date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) P the date inserted in this block does not meet the applicable statutory filing requirements, this date wi	ursuant to 605.020
	t's effective date on the Department of State's records.	n nor be usted a
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on	the earlier o
ne 9	Oth day after the record is filed.	
1	Day 64, 2	
iea _	December 7 . 8017 . Signature of a member or authorized representative of a member	
	0'	

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Typed or printed name of signee

Filing Fee: \$25.00