Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180003650563)))



H180003650583ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name :

: GASSMAN, CROTTY & DENICOLO, P.A.

Account Number : 075350000514

: (727)442-1200

Fax Number

: (727)443-5829

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

OLIVE BROOK 57 LLC

Certificate of Status

O

DEC 28

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

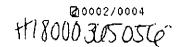
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

H 18000 342 5056 https://ofile.sunblz.org/scripts/efilcovr.exe



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Nume of the Li	(A Florida Limited Liability Company	ears on our records.)	
The Articles of Organization for this Limited Florida document number L17000257649	Liability Company were filed on _	12/18/17 and assigned	
This amendment is submitted to amend the fo	ollowing:		
A. If amending name, enter the new name	of the limited liability company l	here:	
The new name must be distinguishable and contain the	words "Limited Liubility Company," the	designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appl			
(Principal office address MUST BE A STRE			
Fotor new mailing address if anyther last		N	
Enter new mailing address, if applicable:		2	
(Mailing address MAY BE A POST OFFICE	<u> </u>	- 12 P -	
		72 C	
n		<u></u>	
B. If amending the registered agent and registered agent and/or the new registered.	d/or registered office address o		
The Heave Constitution of the Heave Constitu	ottice address here:		
	Alon S. Conner	를 <u>게</u> 5	
Name of New Registered Agent:	Alan S. Gassman		
New Registered Office Address:	1245 Court Street		
	Enter Flo	prida street address	
	Ckarwater	, Florida ³³⁷⁵⁶	
	City	Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:		

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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.

th 8000 365056

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

Title MGR	<u>Name</u> Liam Wehdo	Address 2341 Bartolo Drive	Type of Action
		Land O Lakes, FL 34639	
			Remove
			Change
			□ Change
			□ ∧dd
			Remove
			Change
			Add
			Remayor Change
			=====================================
			□ Remove
			□ Remove
			□ Chanu

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
25
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605/0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. of the earler of: (b) The 90th day after the record is filed.
Dated December 27, 2018
Signature of a member or authorized representative of a member
Alan S. Gassman, Auth. Rep. Typed or printed name of signee

Page 3 of 3

Filing Fec: \$25.00

th 8(1003/050 50