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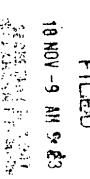
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COVER LETTER

SUBJECT: Chief Motivating Officers, LLC. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Shannon Biagi Name of Person
Chief MotNatha Offices, LLC.
2521 Grand Teton Blvd. Address
Mclbourne, Florida 32935 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shannon biagi at (321) 362-8057 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee Certificate of Status □ \$60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

Chief Motivating Of (Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)	- NOV -	7
The Articles of Organization for this Limited Liability Companies. Florida document number <u>L17000258005</u> . This amendment is submitted to amend the following:	y were filed on 12/19/2017	and assigned	a j
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" or the abb	previation "L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2521 Grand Teton Melbourne, Florida		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2521 Grand Teten Mclbourne, florida	Blvd 32935	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		the name of the no	<u>ew</u>
Name of New Registered Agent:			
New Registered Office Address: 2521	Grand Teton Blvd Enter Florida street address		
mclbo	City, Florida	3 2 9 3 5 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 Type of Action **Title** Name Address AMBR MANUEL A RODRIGUEZ UTZ NATURESWAY DAD W. MELBOURNE, FL 32904 _□ Change □ Add ☐ Remove ☐ Change □ Add □ Remove __ Change □ Add _□ Remove ____ Change □ Add ☐ Remove _ Change ☐ Add

☐ Remove

_____ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	Notember 6, 2018.
	Signature of a member or authorized representative of a member
	Manuel A. Rodriquez Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00