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(F	Requestor's Name)
(F	Address)
(<i>F</i>	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(E	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:

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COVER LETTER

TO:	Registration Section Division of Corpora		7		
SURJI	ECT:	COS MARC Name of Limi	ited Liability Company		
The en	closed Articles of Ame	endment and fee(s) are sub-	mitted for filing.		
Please	return all corresponder	ice concerning this matter i	to the following:		
	-	Edvero	O Veltsch Name of Person	7 .	
	-	<u>Velts</u>	SChi & Co	D LLC	
	-	32 S	OSPRE)/	AVE #101	
	-		City/State and Zip Code		
	_		+ SCM1, CO to be used for future annual re	port notification)	
For fu		rning this matter, please ca	_		
	Edualdo Name of Per	Veltsch!	at (\frac{\frac{14}{1}}{\text{Area Code}})	549 - 8549 Daytime Telephone Number	
	sed is a check for the fo	-			
55/ \$2	5,00 Filing Fee E	1 \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tailahassee, 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

ARTIC	TES OF O	KGANIZATION
	0	F Zu. 1/2
	4 4 0 ~ 4	F Olgo No as it now appears on our records.) Assignment of the second
(Name of the Limited	Liability Compa	ny as it now appears on our records.)
(,4	Florida Limited L	Liability Company)
The Articles of Organization for this Limited Liab	oility Company	were filed on 01 19 2018 and assigned
Florida document number <u>L18 0000 175</u>		
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liabi	ility company here:
The new name must be distinguishable and contain the wor	ds "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:	3751 Kosten Pl
(Principal office address MUST BE A STREET		Sacasota, FL 34240
		, ·
		77ri 1/
Enter new mailing address, if applicable:		3751 Kosten Pl
(Mailing address MAY BE A POST OFFICE BO	<u>2X)</u>	Sarasota, FL 34240
		·
R. If amending the registered agent and/or	· rogictored of	fice address on our records, enter the name of the new
registered agent and/or the new registered office		
	~	
Name of New Registered Agent:	1AYA	ta jel valle rodrialez
New Registered Office Address:	5720	Pierce 54 Enter Florida street address
	Halle	_
	_nony wo	City . Florida 33C2 Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany has been notified in writing of this change.

Changing Régistered 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 = Au	thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	DAYANA D RODRIG	UĒZ	🗆 Add
		5720 Pierce St	
		Hollywood, FL 33021	E Change
MGRM	Luedo A Rodriguez JR		Add
		5720 Pierce St	
		Hollywood, FL 33021	Change
MGRM	Luedo A Rodriguez		_ Add
		5770 Pierce St.	Remove
		Holly wood, FL 33021	Change
			□ Add
			□ Remove
			□ Change
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(If an eff	ive date, if other than the date of filing: (optional) fective 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
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docum	nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
) ine	90th day after the record is filed.
	17/17/18
Dated	12/17/18
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00