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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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J. LEGGETT FEB 1 3 2018 18 FEB 12 PH 12: 0 SEUMOLARY OF STATE TALLAHASSECT FLORIDA

COVER LETTER

TO:	Registration Sec Division of Corp		· · · · · · · · · · · · · · · · · · ·	
SUBJ	ECT:	EDEN Name of Limi	OUTDORS) ted Liability Company	LLC
The e	nclosed Articles of A	mendment and fee(s) are sub-	nitted for filing.	
Please	e return all correspon	dence concerning this matter	to the following:	
		SAMSON	J- (SEHAYE Name of Person	······································
			Firm/Company	
		10826	Fairhaven (20 mg
		Orlando.	FL 32825 City/State and Zip Code	
		Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. Idence concerning this matter to the following: SAMSON ISEHAYE Name of Person Firm/Company 10826 Fach oven way Address Orlando, Fl. 32825 City/State and Zip Code SFY. INVESTMENT @ Gmoul. Com Is-mail address: (to be used for future annual report notification) Incerning this matter, please call: ISEHAYE at (407) 307-5652 Person Area Code Daytime Telephone Number Profollowing amount: IS 30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy		
For fu	rther information co			
	SAMSON- Name of	1SEHAYE Person	at (407) 307- Area Code Daytimo	· 5652 · Telephone Number
Enclo	sed is a check for the	following amount:		
□ \$2	25.00 Filing Fee		Certified Copy	Certificate of Status &

MAILING ADDRESS:

7

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

EDEN ()	UTDOORS 12C
(<u>Name of the Limited Liability (</u> A Florida Li	Company as it now appears on our records.) mited Liability Company)
	pany were filed on 504 24, 2018 and assigned
Florida document number <u>L18000021245</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l liability company here:
The new name must be distinguishable and contain the words "Limited	DOORS LLC Liability Company." the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	· <u>F</u> 2 3
(Principal office address MUST BE A STREET ADDRES	
Enter new mailing address, if applicable:	A P
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or register registered agent and/or the new registered office address	ed office address on our records, <u>enter the name of the nev</u> <u>s here</u> :
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 = I	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			Change.
			D`Add
			□ Remove
			
			□ Add
			☐ Remove
			□.Change.
 		**************************************	D`Add
			□ Remove
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			□ Remove
			□.Change.
			Remove
			☐.Change.

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Filing Fee: \$25.00