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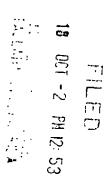
	(Requestor's Name)			
	(Address)			
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PICK-UF	P WAIT MAIL			
	(Business Entity Name)			
 -	(Document Number)			
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OCT 1 7 2018

COVER LETTER

TO:	Registration Section Division of Corporations
, SUBJI	Name of Limited Liability Company
The en	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Marc Broxmeyer Name of Person
	BERGHUTTE LLC Firm/Company
	9818 Bernwood Place Dr. #105
	Fort Myers Florida 33966 Marchrox Yalloo. Com E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	Marc Broxmeyer at 477 880-6739 Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
∱- \$ 2:	5.00 Filing Fee Certificate of Status (additional copy is enclosed) 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

	GHUTTE LLC
(<u>Name of the Limited Liabili</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number	
This amendment is submitted to amend the following:	<u></u> -1
A. If amending name, enter the new name of the limi	ted liability company here:
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR	ESS)
-	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2 7
	<u> </u>
D 16 3° a	72
p. It amending the registered agent and/or regist registered agent and/or the new registered office addr	ered office address on our records, enter the name of the new ess here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
No. D. Co. D. Co. D. Co.	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

MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
AMBR	Susanne Haring	4818 Bernwood PL. DR 105 Fort Myers, Horida 53966	Add	
			☐ Remove	
			Change	
				
			□ Remove	
			O Change	
				
			□ Remove	
			Change	
		· .		
			PROMOVE 7	
			∠_Cl Change	
				
			C Remove	
			Change	
			□ Add	
			C Remove	
			∏ Chance	

. If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

or removed from our records:

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t 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. on the earlier of the record to filed.
Signature of a member or authorized representative of a member
MARC BROXMEYEN Typed or printed name of signee

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