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COVER LETTER

TO:	Registration Se Division of Cor		•					
SUBJE		aterford, LLC						
.,0051		Name of Limited Liability Company						
The en-	closed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please	return all correspo	ndence concerning this matter	to the following:					
		Christopher Bengel						
			Name of Person	<u> </u>				
		Slapfish Waterford, LLC						
		- 	Firm/Company					
		1316 E Michigan St						
			Address					
		Orlando, FL 32806						
			City/State and Zip Code					
		bbengel@floridaburgers.c						
			to be used for future annual report notifi	cation)				
For fur	ther information c	oncerning this matter, please co	all:					
Christ	opher Bengel		407 702-5142					
	Name o	f Person		Telephone Number				
Enclose	ed is a check for th	e following amount:						
		_	□ \$55.00 Elling U.S. 6	□ \$40.00 UU F				
= \$2.	5.00 Filing Fee	· □ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & 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

Slapfish Waterford, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{02/05/2018}{1}$ and assigned Florida document number L18000032346 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	Charles W Bengel	910 M St NW	
		#418	□ Remove
		Washington DC, 20001	☐ Change
	·		
			□ Remove
			Change
			☐ Add
			TALL ARANGE Shange
			AH DEAdd
			Change
			Add
			☐ Remove
			Change
			Add
			□ Remove
			☐ Change

the correct Charles W Be	ngel, since the	ere are 2 of th	nem in the LLC	. Thanks		
						
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Tective date, if other than than effective date is listed, the date in	ie date of filin ust be specific an	g:	to date of filing o	(o r more than 90 days	ptional) after filing.) Purs	uant to 605.02
ote: If the date inserted in this ocument's effective date on the	olock does not i	meet the applic	able statutory fi			
erecord specifies a delaye The 90th day after the re			t an effectiv	e time, at 12:0)1 a.m. on tl	ne earlier
July 3		2018				
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Filing Fee: \$25.00