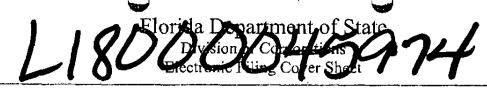
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Division of Corporations



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From:

Account Name : M. FAEHNER, ESQ. LLC

Account Number : I20170000081

Phone

: (727)443-5190

Fax Number

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H18000069468 3

(Name of the Limited Liability Compa (A Florida Limited L		ur records.)
The Articles of Organization for this Limited Liability Company Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		7.4.0
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		THE SERVICE OF THE SE
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		records, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida sti	reel address
	2	, Florida
1 mg -	tis Christia dis	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:

H18000069468 3

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR Sheryl Cory	Sheryl Cory	1679 Drew Street	Add
		Clearwater, FL 33755	□ Remove
			Change
		l ₄	D Add
			□ Remove
			☐ Change
			Add
			Remove To Thank
		CONTRACTOR OF THE PROPERTY OF	CORD CO ASM
			Remove
			□ Change
			Add
			☐ Change
			Remove
		magnetic of the second	Change

m: M. Faehner, Esq. LLCFax: (727) 474-9949	To: 8506176383@rcfax.com	n Fax: (850: 617-6383	Page 5 of 5 03/02/2018 3:04 PM
D. If amending any other infe	ormatiq inter change(s) here:	: (Attach additional s	ys, if necessary.) H18000069468
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E. Effective date, if other than	the date of filing:	•	(optional)
(If an effective date is listed, the date.)	te must be specific and cannot be prior to	o date of filing or more that ble etablicase filing requi	n 90 days after filing.) Pursuant to 605,0207 (3 irements, this date will not be listed as the
document's effective date on	the Department of State's records.	ore statutory timing requ	are the first the same of the same as the
If the record specifies a del	ayed effective date, but not	an effective time,	at 12:01 a.m. on the earlier of:
(b) The 90th day after the		• • • • • • • • • • • • • • • • • • •	
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Dated March 2	2018		
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	Signature of refinance for support	red tehtestimanse or a m	Manual Control of the
Michael Faehner,	Registered Agent	-	
	Typed or printed	Lugare of January	

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