11800054296

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	÷#)
PICK-UP	MAIT	MAIL
(Bı	usiness Entity Nam	ne)
(Dx	ocument Number)	-
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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May 16, 2018

JORGE SIMPSON 6270 SW 8TH ST N LAUDERDALE, FL 33068

SUBJECT: LAWTON WARES LLC Ref. Number: L18000054296

We have received your document for LAWTON WARES LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 618A00010223

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

COVER LETTER

	egistration Sectivision of Corp			
SUBJECT	·:	AWTON WAR	red Liability Company	
The enclos	sed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please retu	ım all correspon	dence concerning this matter t	o the following:	
		Jorg Sim	Name of Person	-
			Firm/Company	
		(270 5	N The Six Address	
		1/0144 Co	City/State and Zip Code	68
		E-mail address: (to	and the specific control of th	cation)
For further	information co	ncerning this matter, please ca	II:	
	Name of	Person	at (154) 557-33 Area Code Daytime	Telephone Number
	s a check for the Filing Fee	following amount: \$\Bigsirem\$\$ \$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

(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 3-1-15 and assigned Florida document number 1800054296
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 new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address Florida
City City Code C
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
MGR	Maragret Reyes	Address 6270 SUSINSI N. Landondolp Ft	□ Add
			Change
			🖸 Add
			☐ Remove
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Filing Fee: \$25.00