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DIVISION OF CORPORATIONS

N COOPER MAY 11 2018

## **COVER LETTER**

TO:

ro:	Registration Section Division of Corporations
SUBJE	CT: Garrsensz LLC Name of Limited Liability Company
	Name of Limited Liability Company
711	losed Articles of Amendment and fee(s) are submitted for filing.
	eturn all correspondence concerning this matter to the following:
i icasc	
	James T. W. 1 Kinson Name of Person
	Pincl193 Tav IN
	172. N. Belcher ed
	Address
	Clyarwaidyr FL 33765 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
<u></u>	Name of Person at (727) 4/79-4/590  Area Code Daytime Telephone Number
	ded is a check for the following amount:  5.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee,  Certificate of Status \$\Bigcup \$(additional conv.) is enclosed) Certified Copy
	(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

(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 <u>03/08/26)8</u> an Florida document number <u>L 18000 b 0952</u> .	d assigne	ed
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 abbreviati	on "L.L.C	<del></del>
Enter new principal offices address, if applicable:	<b>=</b>	<u>S</u>
(Principal office address MUST BE A STREET ADDRESS)	- <del>\$</del>	<del>- 22</del>
	9	
The second secon	<b>3</b>	25 CC
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	<del>- 3</del>	RAIN
Inding data con the result of		2
B. If amending the registered agent and/or registered office address on our records, enter the new registered agent and/or the new registered office address here:	iame of	the new
Name of New Registered Agent:		
New Registered Office Address:  Enter Florida street address		<del></del>
Florida		
, Florida	) 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 provisions of all statutes relative to the proper and complete performance of my duties, and I am family accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this being filed to merely reflect a change in the registered office address, I hereby confirm that the limited company has been notified in writing of this change.	iar wun is docum	unu ient is

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>	Name	Address	Type of Action
AMBR	nalik uddin	6891 Dalkeith Ave 1	<u> </u>
		St. Prtersburg, FL3	<b>370∜</b> □ Remove
			Change
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i amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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F ffective	e date, if other than the date of filing:(optional)		
Can allen	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date w	Pursuant to 605 vill not be liste	5.02 .ed
documen	it's effective date on the Department of State's records.		
ne reco	and specifies a delayed effective date, but not an effective time, at $12\!:\!01$ a.m. on the day after the record is filed.	n the earli	er
THES	oth day after the record is mean		
Dated	5 th Hay 2018		
	monday		
	17 16 16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
_		<del></del>	
	Signature of a member or authorized representative of a member	·	

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Filing Fee: \$25.00