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Office Use Only



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2018 OCT 15 NH 9: 43

M. MILLIGAN OCT 2 0 2018

### **COVER LETTER**

то:	Registration Sec Division of Corp			
	LMP EUA I			
SURJI	ECT:		ted Liability Company	
The en	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspoi	ndence concerning this matter t	to the following:	
		EDUARIXO UELTSCHI		
			Name of Person	
		UELTSCHI & CO LLC		
		32 S OSPREY AVE, STE I	Firm/Company 101	
		SARASOTA, FL34236	Address	
		COLINOSTEIU@AS	City/State and Zip Code	
		E-mail address: (1	to be used for future annual report noti-	lication)
For fur	ther information co	oncerning this matter, please ca	ill:	
EDUA	ARIXO UELTSCHI		941 549-8549 at ( )	
	Name of	Person	at () Area Code Daytim	e Telephone Number
Enclos	sed is a check for th	e following amount:		
\$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, F1. 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

LMP EUA LLC				* 4 🗟
(Name of the Limited				
The Articles of Organization for this Limited Lia Florida document number  This amendment is submitted to amend the follow	·	were filed on	08/2018	and assignce
A. If amending name, enter the new name of t	_	ility company he	<u>re</u> :	고하는 60 기타 #
The new name must be distinguishable and contain the wor	rds "Limited Liabi	lity Company," the de	esignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicat	ble:	7301 West Coun	itry Club Dr N, Apt 116	
(Principal office address MUST BE A STREET		SARASOTA, FL 34243		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	7301 West Country Club Dr N, Apt 116 SARASOTA, FL34243			
B. If amending the registered agent and/o registered agent and/or the new registered offi	-	<u>e</u> :	our records, enter	the name of the no
Name of New Registered Agent.	7301 West Country Club Dr N, Apt 116			
New Registered Office Address:	Enter Florida street address			
	SARASOTA	imer Piori		243
		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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added</u> <u>or removed from our records</u>:

MGR = Manager

AMBR =	Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			_□ Remove
			□ Change
			Add
			Remove
			Change
			Add
			□ Remove
			_□ Change
			☐ Remove
			☐ Change
			_
			□ Remove
			Change
		<del></del>	∧dd
			Remove
			☐ Change

). If an	nending any other infor	mation, enter c	hange(s) here:	(Attach addition	al sheets, if necessa.	ry.)
•						
		-				<del> </del>
			· <del></del>			
F Fffec	tive date if other than t	the date of filin	·a·		(ontional	)
Note	etive date, if other than to effective date is listed, the date 11 the date inserted in this ment's effective date on the	s block does not i	meet the applicab	date of filing or more le statutory filing r	than 90 days after filing equirements, this dat	g.) Pursuant to 605.0207 (3 e will not be listed as th
	ecord specifies a dela e 90th day after the r			an effective tin	ne, at 12:01 a.m	. on the earlier of:
Data	October 9th		2018			
Date	" :A			<b>)</b> .		
		Signature of a	member or authori	zed representative of	a member	2018
	PIER L PIERUCCI					

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Typed or printed name of signee

Filing Fee: \$25.00