L18000 103960

(Re	questor's Name)	
(Ad	dress)	_
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
<u></u>	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

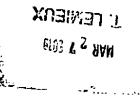




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FILED BOOK



COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Phoenix Ent	1 + V LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Anthony	Lapietra Name of Person	
	Clog kind	Firm/Company	
	119010 mec	LAUWAUTE PIACE	
		FL 34211 City/State and Zip Code -ANAY 1902@ YAY to be used for future annual report noti	
For further information c	concerning this matter, please ca		,
Anthony	LUPILTRU of Person	at (<u>613</u>) <u>454</u> - Area Code Daytim	7441 e Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 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

Ph o enix	Entity LLC
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document numberL1800103960 This amendment is submitted to amend the following:	were filed on 4 25 AFR and assigned and assigned AFR
A. If amending name, enter the new name of the limited liab	
Clog kings of Manatle LLC The new name must be distinguishable and contain the words "Limited Liabil	S or
The new name must be distifiguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	11906 Meadowate Place
(Principal office address MUST BE A STREET ADDRESS)	Bradenton, FL 34211
Enter new mailing address, if applicable:	11900 Meadowgate place Braderton, FL 34211
(Mailing address MAY BE A POST OFFICE BOX)	BraderHory, PL 34211
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	Mice address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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 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
			□ Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
		-	
			□ Remove
			Change
		□ Add	
			Remove
			Change
	•		Remove
			□ Change

(If an effective Note: If th	date, if other than the date of filing:
	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: th day after the record is filed.
Dated	Signature of a member or authorized representative of a member
	Anthony - Lupiletru Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00