L18000 118837

(Requestor's Name)				
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(City/State/Zip/Phone #)				
(City/State/Zip/Prione #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Woodstock Sphere Real Estate LLC Name of Limited Liability Company				
The enclosed Articles of Amendment and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Kathleen Hardesty				
Woodstock Sphere Real Estate LLC				
140 Tornahawk Dr M14				
Indian Harbor Beach FL 32937 City/State and Zip Code				
Kathyscommercial@gmail.com /E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Person at (321) 698-4266 Name of Person Daytime Telephone Number				
Enclosed is a check for the following amount:				
□ \$25.00 Filing Fee \$30.00 Filing Fee \$ □ \$55.00 Filing Fee \$ □ \$60.00 Filing Fee \$ Certificate of Status				

'TO:

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

Woodstock Sphere	L Heal Estate 1	LLC	
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L 18000 18837</u> .	were filed on <u>05/11/18</u>	and assign	ned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C	
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)	Woodstock Sphere 140 Tomahawk D	r M14	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	Indian Harbor Bear fice address on our records, enter		•
Name of New Registered Agent:		HASS	T
New Registered Office Address:		र्गेकेन्द्र चीं सिंहन	
	Enter Florida street address	FLOR	ED O
-	, Florida	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:

MGR = Manager AMBR = Authorized Member **Title** <u>Name</u> **Address** Type of Action AMBR Holly Stahl 310 Bry Lynn Dr DAdd Melhourne FL 32904 Remove

			to Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Acc. : 22
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70 J
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated 11) ay 25 . 2018.
Signature of a member or authorized representative of a member
Kathleen Hardesty Typed or printed name of signee

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Filing Fee: \$25.00