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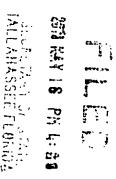
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MAY 22 2018

J. HARRIS

COVER LETTER

Division of Corp	orations		
subject: <u>3781</u>	SE 16th Tem	TACL LLL ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	FRASER ROW	Je & Lynn Ma	thon
	Ø	Firm/Company	
		2nd Ave	
	Deer fi	eld Bch, F1 3	3344
	E-mail address: (1	eld Bch, F13 City/State and Zip Code Ski @ be//sou H to be used for future annual report notif	n. net
For further information ec	oncerning this matter, please ca		
Lynn 1 Name of	Mathon Person	at (561) 239 Area Code Daytime	1720 : Telephone Number
Enclosed is a check for th	e 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:

TO:

Registration Section

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

3781 SE 16th Terr (Name of the Limited Liability Compa	acy LLC inv as it now appears of Liability Company)	n our records.)	<u>_</u>
The Articles of Organization for this Limited Liability Company Florida document number		5/16/18	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab 3781 NE 16th Terrace		:	
The new name must be distinguishable and contain the words "Limited Liabi	Bly Company," the design	gnation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	ALA	<u> </u>	3
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	7.	35¢ (1)
) = 3 40.5	- PASE
	1.		eo
Enter new mailing address, if applicable:	A A		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		(3) 21) 2 ·	
			<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>enter the</u>	name of the n
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 agr provisions of all statutes relative to the proper and complete			• •

If Changing Registered Agent, Signature of New Registered Agent

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 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
			□ Add
			□ Remove
			Change
			Add
			☐ Remove
			Change
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			Change
			□ Add
			□ Remove
		Sold in the second seco	Change
			
			Remove ray
	·		D Add
			□ Remove
			□ Change

	ormation, enter change(s) here: (Attach additional sheets.	y necessary.
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	-	
(If an effective date is listed, the date inserted in	n the date of filing:	
the record specifies a de) The 90th day after the	layed effective date, but not an effective time, at 1: e record is filed.	2:01 a.m. on the earlier of:
Dated 5 17 18	Mathin	223 GALLANA
	Signarue of a member or authorized representative of a member Lynn A. Mathun Typed or printed name of signee	Sign of the sign o

Page 3 of 3

Filing Fee: \$25.00