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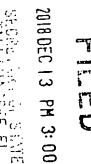
(Requestor's Name)
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R. WHITE DEC 2 6 2018

COVER LETTER

	Registration Secti Division of Corpo			
SUBJEC	T: <u>W.ls</u>	Name of Limit	ed Liability Company	C
The enclo	sed Articles of Ar	mendment and fee(s) are subn	nitted for filing.	
Please ret	urn all correspond	ence concerning this matter to	o the following:	
		Brian Da	Name of Person	·
		Collie	Firm/Company	~a/
		8304 Bow	den Way Address	
		dwilson 2 E-mail address: (to	City/State and Zip Code 2. florida @ 9 o be used for future annual report now	7 5 (3 mail. com fication)
For furthe	er information con	cerning this matter, please ca	П;	
	Name of P	wilson Person	at (<u>407)</u> <u>592</u> Area Code Daytime	- 2151 e Telephone Number
Enclosed	is a check for the	following amount:		
E \$25.0	0 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

FILED

The Articles of Organization for this Limited Liability	d Enterpr. lity Company as it how ap da Limited Liability Compa	pears on our records.) ny) TALL CAR	3 PM 3:00
The Articles of Organization for this Limited Liability	Company were filed or	5/18/18	and assigned
Florida document number <u>418000(2524</u>	7 .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability compan	y here:	
Brian Dwid wils The new name must be distinguishable and contain the words "Lie	on Tr.	260	
The new name must be distinguishable and contain the words "Li	mited Liability Company,"	the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Sam	e Aldress	
(Principal office address MUST BE A STREET ADD	-		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Sam	Address	
B. If amending the registered agent and/or registered agent and/or the new registered office ad-		on our records, <u>enter</u>	r the name of the new
Name of New Registered Agent:	Same Ag	rent	
New Registered Office Address:	Enter	Florida street address	
		Florida	
	City	, rwida	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

ÁMBR = .	Authorized Member		
<u>Title</u>	<u>N</u> ame	Address	Type of Action
	····		
			□ Remove
			☐ Change
			□ Remove
			Change
			□ Add
			Remove
			Change
			Remove
		•	☐ Change
			
			Remove
			Change
		****	☐ Remove
			Channa a

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ectiv	e date, if other than the date of filing: (optional) tive 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 605.020
reffec te: If	tive 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 605,020 The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
	it's effective date on the Department of State's records.
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
	Oth day after the record is filed.
	December 12. 2018 Signature of a member or authorized representative of a member Being David (2): 150. To
ed	16 cm bur 16. 1018.
	Signature of a member or authorized representative of a member
	Brian Dwid wilson Tr. Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00