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(Red	questor's Name)	
(Ado	iress)	
(Business Entity Name) (Document Number)		
(City	//State/Zip/Phone	· #)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	MAIL	
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Special Instructions to F	Filing Officer:	
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Amend

86/11/18--01018--010 ••25.00



N. CAUSSEAUX JUN 1 4 2018

COVER LETTER

TO: Registration ! Division of Co			
SUBJECT:	CACH EVE	RYDAY LLC ited Liability Company	
<u></u>	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	DAY	A-KA-R ALUVAL	_A
		Name of Person	
	CASH	EVERYDAY L	LC
		Firm/Company	
	401	W 15th ST United	+ 1554
		Address	
	SANF	ORD FL 32 City/State and Zip Code	772
	C.P.S.H. EV C.R. E-mail address: (STDAYATM STEV) to be used for future annual report noti	(ES @ OUTLOVE CEM
For further information	concerning this matter, please ca		
DAYAK N Name	OF Person	at (407) 402 Area Code Daytim	e Telephone Number
Enclosed is a check for	the 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

This amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Inter new principal offices address, if applicable:	(Name of the Limited Liability Com			our records.)	
his amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC". Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Florida Florida	(A Florida Limite	Liability Comp	any)	·	
If amending name, enter the new name of the limited liability company here: the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	The Articles of Organization for this Limited Liability Compar lorida document number $U8000126121$	y were filed (on <u>\$</u>	-119/2018	and assigned
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Enter Florida street address, Florida	Name of New Registered Agent:				
Enter Florida street address, Florida	New Registered Office Address:				
		Ente	er Florida s	treet address	
				, Florida	
		City		 -	Zip Code

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

	from our records:				person being aud
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<u>Title</u>	<u>Name</u>	UNNK -	Address		Type of Action
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			Sanford	FL 32771	Remove
					Change
MM	DayaKar Ali	avala	521 Ka	ys landing Dr	⊠ Add
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Filing Fee: \$25.00