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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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August 11, 2018

VERONICA PHOLS 15508 SUMMIT PLACE CIR NAPLES, FL 34119

SUBJECT: ERIK POHLS INVESTMENTS LLC

Ref. Number: L18000138607

We have received your document for ERIK POHLS INVESTMENTS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please 2all (850) 245-6051.

Deborah Bruce Corporate Records Supervisor Letter Number: 018A00016602555 F

COVER LETTER

Division of Corp	porations				
SUBJECT: ERIK	- PUHLS INVES	STMENTS, LLC ited Liability Company			
		, , ,			
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspor	ndence concerning this matter	to the following:			
	VERONICA	POHW			
	<u> </u>	Name of Person			
		Firm/Company			
		Address			
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	Vara 100 2	City/State and Zip Code	ر <u>سم</u> م	A.	-7
	VEY 105 CO Ji-mail address: (to be used for future annual report notific	ation)	2018 AUG 1 5	
For further information co	ncerning this matter, please co	ıll:	ing.	· ·	ŗ
VERONICA P	'OHLS	at (<u>239</u>) 7.7.1. Area Code Daytime 1	6094 S	PH 2: 47	
Name of	Person	Area Code Daytime	l'elephone Number	ं द्य	
Enclosed is a check for the	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 Statu Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

ERIK POHLS INVESTMENTS (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on JUNE 5, ZO18 and assigned Florida document number <u>L1800013860</u>+ This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liab	ility company here:					
ERIK POHLS, LLC.						
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:	<u> </u>					
(Principal office address MUST BE A STREET ADDRESS)	15508 SUMMIT PLACE LIKE					
	NAPLES, FL 34119					
	2016 TACE					
Enter new mailing address, if applicable:						
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)						
	<u> </u>					
B. If amending the registered agent and/or registered of	1/1 agrant.					
registered agent and/or the new registered office address here	의 기계					
	TAN PROPERTY OF THE SECOND SEC					
Name of New Registered Agent:						
New Registered Office Address:	Enter Florida street address					
NAPOL	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, 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
<u>AMBP</u>	VERONICA POHLS	15508 SUMMIT PL CIR	
		NAPLES, FL 34119	□ Remove
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If an effective d Note: If the c	te, if other th ate is listed, the d late inserted in ffective date of	date must be sp i this block do	ecific and canno nes not meet th	it be prior to d re applicable	ate of filing	or more than S filing require	(option 0 days after fi ments, this o	ling.) Pursua	int to 605. It be liste	0207 (d as ti
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Page 3 of 3

Filing Fee: \$25.00