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SECRETARY OF STATE DIVISION OF CORPORATIONS

N COOPER JUL 25 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT:
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gue/mose Anblay Name of Person
Sue/mose Amblay Name of Person 526 Jacques Services // C Firm/Company
8746 Terracina lake dr
Tampa F1 33625 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Ambray at (305) 764 - 7656 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee S30.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (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

(Name of the Limited Liability I (A Florida Un	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document number <u>L 1800014865</u>	npany were filed on 5 van e 18, 2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
·	1 Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	- SE
<u>Principal office address MUST BE A STREET ADDRES</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	B PM 1: 38
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	red office address on our records, enter the name of the new ss here:
	ivelmose Ambeau
New Registered Office Address:	746 Terragina Jake dr. Enter Florida street address
	7 gm ga Florida 33625 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Note:	ive date, if other than the date of filing:	t to 605.02
f the rebb) The	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	earlier
Dated	July 13 2018.	

Page 3 of 3

Filing Fee: \$25.00