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## **COVER LETTER**

	gistration Sect vision of Corpo			
SUBJECT	- H/	P Grainstill Name of Lim	ited Liability Company	
The enclose	ed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspond	dence concerning this matter	to the following:	
		HHP (	Snainesville, UC Firm/Company	
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		E-mail address (	riperty couldle !! (	anail com
For further	information cor			
Ann	Ca Krva Name of I	pińska erson	at ( <u>132) 648 · 41</u> Area Code Daytime	47 Telephone Number
Enclosed is	a check for the	following amount:		
□ \$25.00	Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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 Compa	any as it now appears on	1 our records.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>LISCONEES</u> .	v were filed on 10 7	uly 2018	and assigne	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	bility company here:			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the desig	nation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:				<b>5</b>
(Principal office address MUST BE A STREET ADDRESS)			<b>66</b>	
		**		<u> </u>
			မ မ	
Enter new mailing address, if applicable:		<del></del>	<del></del>	<del>39</del> 5
(Mailing address MAY BE A POST OFFICE BOX)	me must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the w principal offices address, if applicable:  ### distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the w principal offices address, if applicable:  #### distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the w principal office address **MUST BE A STREET ADDRESS**			် ကို
			<u> မ </u>	<u>]</u>
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		ir records, <u>enter t</u>	he name of t	he nev
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida .	street address		
		Florida		<del></del>
	•		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	Ė			

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>	<u>Address</u>	Type of Action
AMBR	Herbert Wessbach	8008 Desmond Dr.	Add
		8008 Desmond Dr. Boynton Beach 1FL33	XRemove
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ted	Aug. 1,	<u></u> .	2018 Kuezr	<u> </u>					
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