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I ALBRITTON

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	T: X- 124 Space Storage, LLC Name of Limited Liability Company	
The en	osed Articles of Amendment and fee(s) are submitted for filing.	
Please	turn all correspondence concerning this matter to the following:	
	JASON REISWAN Name of Person	
	Firm/Company	
	1240 PALME HU RO Address Estis FL 32726 City/State and Zip Code	
	Ey415 FL 32726	
	City/State and Zip Code NFO 2 4 2 A SPACE NOW. (OM E-mail address: (to be used for future annual report notification)	
For fur	er information concerning this matter, please call:	
-1 	Name of Person at (980) 226-0875 Area Code Daytime Telephone Number	_
Enclos	is a check for the following amount:	
□ \$2:	Of Filing Fee Sand Sand Filing Fee & South Sand Sand Status Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is	Status &

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

+-tizk Space Starting	, 46	
(A Florida	ty Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 07/27 18	and assigned
Florida document number <u>L 8000 80328</u>	_··	·
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the abb	reviation "L,L,C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		5
		2.
B. If amending the registered agent and/or registoregistered agent and/or the new registered office address.	ered office address on our records, <u>enter tl</u> <u>ess here</u> :	ne name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 =yAuthorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Name RODNEY ROISMAN	10952-Woon Ceest LN LEESBURG FL 34788	Add
			Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
			Remove
			Change
			☐ Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change

_	OWNERSHIP OF COM LLC AS LISTEN BELOW
_	JASON REISMAN 50%
_	DAGN REISMAN 50%
-	
_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
Note:	ye date, if other than the date of filing:
the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	12-30-18
	Signature of a member or authorized representative of a member
	JASON REISMAN Typed or printed name of signee

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Filing Fee: \$25.00