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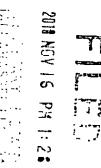
(Requestor's Name)				
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(Document Number)				
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COTENDETER

TO:		istration Sect ision of Corpo					
SUBJE	ECT:	Island-Gurl L	LC				
			Name of Lim	ited Liability Company			
The en	closed	Articles of A	mendment and fee(s) are sub	omitted for filing.			
Please	return	ali correspond	dence concerning this matter	to the following:			
			Glenda P. Skelton-Walker				
				Name of Person			
			Island-Gurl LLC				
				Firm/Company			
			4901 E. Silver Springs Blv Ste 301-21	rd.			
				Address			
			Ocala, Fl				
			geewalker40@gmail.com	City/State and Zip Code		::: >	
			E-mail address: (to be used for future annual report notif	ication)	2611 NOV	- T
For fur	ther in	iformation cor	ncerning this matter, please c	all:			
glenda	p. Sk	elton-Walker		352 3461900 at ()		ြည်သို့ ကား	:;
		Name of I	Person		: Telephone Number	PM 1: 2:	
Enclose	ed is a	check for the	following amount:			·	
■ S2:	5.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of 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 ORGANIZATION OF

any as it now appears on our records.) Liability Company)			
were filed on 9/26/18	and assigned		
oility company here:			
lity Company," the designation "LLC" or the ab	obreviation "L.L.C."		
4901 E Silver Springs Blvd.			
Ste 301-21			
Ocala, Fl. 34470			
4901 E. Silver Springs Blvd.			
Ste 301-21			
Ocala, Fl. 34470			
office address on our records, <u>enter</u>	2818 NOV 1-6		
Enter Florida street address			
	Dility Company here: Ility Company," the designation "LLC" or the ale 4901 E Silver Springs Blvd. Ste 301-21 Ocala, Fl. 34470 4901 E. Silver Springs Blvd. Ste 301-21 Ocala, Fl. 34470 ffice address on our records, enter re:		

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Charles R. Bradshaw	7195B Sunningdale Dr. Ocala, Fl. 34472	
			Remove
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		281
		28 NOV
		7/11/2
		FN N Se at
C. Effective date, if other than the diff an effective date is listed, the date must Note: If the date inserted in this bloc document's effective date on the Dep	be specific and cannot be prior to date of filing or mock does not meet the applicable statutory filing	(optional) ore than 90 days after filing.) Pursuant to 605.0207 (3)(b) requirements, this date will not be listed as the
f the record specifies a delayed b) The 90th day after the reco	effective date, but not an effective tird is filed.	me, at 12:01 a.m. on the earlier of:
Dated October 14,	2018	
Slenda	A Skelton - Waller ignature of a member of authorized representative of	of a member
Glenda P. Skelton-Walke		
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00