## L18000 228 478

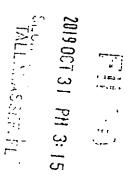
(1	Requestor's Name)	
(/	Address)	
(/	Address)	·
((	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(1	Business Entity Name)	_
(1	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	to Filing Officer:	

Office Use Only



800336021888

10/31/19--01021--003 \*\*30.00





## **COVER LETTER**

то:	Registration Se Division of Cor			
, SUBJE		Anderson, LLC		
SUBJE	.C.1:	Name of Lim	ited Liability Company	<del> </del>
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Shea Ward		
		1170 John Anderson, LLC	Name of Person	
		2000 N. Orange Ave	Firm/Company	<del></del>
		Orlando, FL 32804	Address	
		sward@majorsinvestments.	City/State and Zip Code com	
For fur	ther information c	E-mail address: (oncerning this matter, please c	to be used for future annual report notifall:	Tication)
Shea V	Vard		407 228-9950 at ()	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclose	ed is a check for th	ne following amount:		
□ \$2:	5.00 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 Status & 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

1170 John Anderson, LLC

company has been notified in writing of this change.

(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited Liability Compan Florida document number $\frac{118000228478}{}$ .	y were filed on 09/26/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		2019 OCT 3   PM (
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he	office address on our rec <u>re</u> :	ords, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
	City	, Florida
New Registered Agent's Signature, if changing Registered Agent	•	хір Сойе
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete		

If Changing Registered Agent, Signature of New Registered Agent

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

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
MGR	Sunshine State Holdings, LLC	2000 N. Orange Ave, Orlando, FL 32804	□ Add
			■ Remove
			☐ Change
MGR Tim	Timothy Majors	2000 N. Orange Ave, Orlando, FL 32804	
			☐ Remove
			Change
			□ Remove
			☐ Change
			□ Remove
		Change	
		Add	
			Remove
			Change
		Add	
			□ Remove
			☐ Change

-	
-	
-	
-	
-	
_	
-	
-	
-	
-	
-	
-	
-	
-	
_	
-	10.00.00.00
Effect	ve date, if other than the date of filing: (optional)
Note:	ve date, if other than the date of filing:
the red	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	October 29
	$\mathcal{A}$
	Signature of a member or authorized representative of a member
	Timothy Majors
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00