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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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COVER LETTER

TO: Registration Sc Division of Cor				
SUBJECT: <u>Pe</u>	gel Towers Group LCC Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Curtis Peter	S Name of Person		
	<u> </u>	S Group LLC Firm/Company		
	256 Heronwa	od Circle Address	2816 OUT	-17
	Dettona, FL	31725 City/State and Zip Code		1
	Curtis @ regalti E-mail address: (ower SAMO COM to be used for future annual report notif	ication)	ا ا
For further information e	oncerning this matter, please co	all:	100 mg/m	cas 4
Curtis Peter	<u>rS</u> f Person	at (<u>467</u>) <u>791 - 993</u>	7-1 Telephone Number	
(vanic o	i i cison	Area Code Daytine	rereptione (value)	
Enclosed is a check for the	ne following amount:			
\$25.00 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

Regal Ton	pers Group LLC
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liab	ility Company were filed on 9/26/18 and assigned
Florida document number <u>L18006228794</u>	<u> </u>
This amendment is submitted to amend the following	ing:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	le:
(Principal office address MUST BE A STREET)	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	2X)
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the nev
registered agent androg the new registered office	<u>د عمران دی الداد.</u> کار نظام الداد
Name of New Registered Agent:	Kelly Peters E
New Registered Office Address:	
_ _	Enter Florida street address
	ب ب بي بي Florida <u>بعار</u> بي
	City Tin Costs

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.

f Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>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
AMBIL	Kelly Peters	256 Hennwood Cricle	
		Dettona, FL 32725	Remove
			☐ Change
AMBL	Curtis Peters	252. Heranwood Circle	Add
		Deltona, FL 32725	□ Remove
			□ Add
			□ Remove
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ective date, if oth a effective date is liste	e r than the d i I, the date must b	ate of filing: e specific and	: cannot be prior	to date of filir	ng or more th	(opt in 90 days afte	ional) er filing.) P	ursuant to 605.
te: If the date insercument's effective of					y filing requ	iirements, th	is date wi	ll not be liste
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he 90th day aft	er the recor	a is filea.						
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			8	<u> </u>	*	Kelly /	w	<u></u>
		gnature of a m	ember or auth	arized represe	ntative of a n	rembed 1		

Page 3 of 3

Filing Fee: \$25.00