118000238129

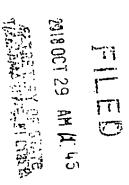
(Req	questor's Name)	
(Add	lress)	
(Add	iress)	·
(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F		

Office Use Only



300320006033

10/29/18--01025--021 **25.00



Y SULKER NOV 16 2018

COVER LETTER

Đivi	ision of Corp	porations				
SUBJECT:	201810FL,	L1.C				
		Name of Lim	ited Liability Company			
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	ndence concerning this matter	to the following:			
		Weston Caindec				
			Name of Person			
		Anderson Business Adviso	ors			
Firm/Company						
	3225 McLeod Drive, Suite 100					
			Address			
		Las Vegas, Nevada 89121				
			City/State and Zip Code			
		ra@andersonadvisors.com			建 医	
			to be used for future annual report notifica	ition)	2018 OCT	بيهمه
For further in	nformation co	oncerning this matter, please c	all:		福日 2	-
Weston Cair	ndec		800 706-4741		Q	1
	Name of	Person	Area Code Daytime T	'elephone Number		
Enclosed is a	check for th	e following amount:			कुष्ट ।	
\$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	

MAILING ADDRESS:

TO:

Registration Section

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

201810FL, LLC		
(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our record ted Liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liability Comparing document number <u>L18000238129</u> .	any were filed on 10/10/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited 1	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability 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)	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		FILE AN
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	ss
	, FI	orida
	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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	CANONACO, MARCO	8075 30TH AVE N	□ Add
		ST. PETERSBURG, FL 33710	Remove
			☐ Change
			Add
			Remove
			Change
			PRemove
,			Grange 5
			□ Remove
			□ Change
			Add
			☐ Remove
			Change
			Remove
			Change

						
						
· · · · · · · · · · · · · · · · · · ·						
····						
				-		
		 		· -		
	<u> </u>					_
						
				18	r 'a	
				3 177		
					<u> </u>	
- 				1	<u> </u>	res andre
						
				174	=	117
 -						C7
				THE STATE OF	က်	
	1			(antional)		
ective date is listed, the date m	ast be specific and cannot	be prior to date of f	iling or more than 90	days after filing.)	Pursuant t	o 605.0
If the date inserted in this b	lock does not meet the	e applicable statut	ory filing requirem	ents, this date v	vill not b	e listed
ent's effective date on the l	Department of State's (records.				
ord specifies a delaye	ed effective date, I	but not an effe	ective time, at .	12:01 a.m. d	n the e	arlier
90th day after the re	cord is filed.					
October 24th	201	8 ·				
11/	7 //					
6///	4/6					
	ective date is listed, the date made to the date inserted in this beent's effective date on the I cord specifies a delayer	ective date is listed, the date must be specific and cannot all the date inserted in this block does not meet the ent's effective date on the Department of State's cord specifies a delayed effective date, 90th day after the record is filed. October 24th 201	If the date inserted in this block does not meet the applicable statutent's effective date on the Department of State's records. Ford specifies a delayed effective date, but not an effective day after the record is filed. October 24th 2018	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90. If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records. Ford specifies a delayed effective date, but not an effective time, at 90th day after the record is filed. October 24th 2018	ve date, if other than the date of filing:	ve date, if other than the date of filing:

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee