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(F	Requestor's Name)	
	Address)	
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((City/State/Zip/Phone #)	
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(8	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of S	tatus
Special Instructions t	to Filing Officer:	-





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ÇOVER LETTER

TO: Registration Se Division of Cor		•			
	terprises of Florida, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
	Amendment and fee(s) are sub				
	Lora C. Andrews				
		Name of Person			
	Alliance Enterprises of Flo	rida, LLC			
		Firm/Company			
	34305 142nd Ave. E				
	· · · · · · · · · · · · · · · · · · ·	Address			
	Myakka City, FL 34251				
		City/State and Zip Code		_	· 5.
	landrews@allianceentfl.com			1.5 1 	
	E-mail address: (to be used for future annual report notifi	cation)	. <u>k"</u>	• •
For further information c	oncerning this matter, please ca	ill:		C.	
Lora C. Andrews		941 321-6771 at (, _)		9 :21 s.J	ेड: १७
Name o	f Person	Area Code Daytime	Telephone Number	5: 0.7	HOLLY?
Enclosed is a check for the	ne following amount:				4.3
□ \$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**

Alliance Enterprises of Florida, LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records. ted Liability Company)	J
The Articles of Organization for this Limited Liability Comp	any were filed on 10/24/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited i	liability 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>	
		<u></u>
Enter new mailing address, if applicable:	456 Park Trace Blvd.	·
(Mailing address MAY BE A POST OFFICE BOX)	Osprey, FL 34229	
B. If amending the registered agent and/or registered		enter the name of the new
registered agent and/or the new registered office address	<u>nere</u> :	. `
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida Zin Code
New Registered Agent's Signature, if changing Registered Age	•	гар Сіки
The selection of the second se		than aguar to comply with the

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	Larry C. Blanton, Jr.	34305 142nd Ave, E Myakka City, FL 34251	■ Add
			□ Remove
			☐ Change
			Remove
			☐ Change
			D Add
			□ Remove
			Add
			☐ Remove
			□ Change
		Add	
	~	□ Remove	
		☐ Change	
			Remove
			☐ Change

. If amending any other informat	tion, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	date of filing:
the record specifies a delayed) The 90th day after the reco	d effective date, but not an effective time, at 12:01 a.m. on the earlier of: ord is filed.
Dated January 23	2018
_	Signature of a member or authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00