## L18000286/34

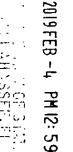
(Re	questor's Name)	
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C. GOLDEN FEB - 9 2019

## **COVER LETTER**

TO:	Registration Se Division of Cor			e e	
21   12 1	AVID G	roup, LLC	•		
SUBJ	ECT:	Name of Lim	ited Liability Company		
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
			Tracy Scott		
		<del></del>	Name of Person		
			AVID Group, LLC		
			Firm/Company		
		3	2300 Curlew Road, Suite 201		
			Address		
			Palm Harbor, FL 34683		
			City/State and Zip Code		
			tracy.scott@avidgroup.com		
		E-mail address: (	to be used for future annual report notif	ication)	
For fu	rther information c	oncerning this matter, please co	all:		
	Tracy S	Scott	727 789-9500 ex.		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclos	sed is a check for th	ne following amount:			
□ <b>\$</b> 2	25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ 355.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60 00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclo	

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

FILED

	Group, LLC	2019 FEB -4 PM 12: 59
(Name of the Limited L	iability Company as it now appears on o lorida Limited Liability Company)	ur records.)
		The state of the s
The Articles of Organization for this Limited Liabil	ity Company were filed on 1772019	and assigned
Florida document number L18000286134	·	
This amendment is submitted to amend the following	og:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent:		records, enter the name of the nev
New Registered Office Address:	Enter Florida str	eet address
		Florida
_	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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGK = Månager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
P	Steven J Stuebs	2300 Curlew Road, Suite 201, Palm Harbor, FL 34683	<b>=</b> Add
		<del></del>	□ Remove
			☐ Change
S/T	Tracy S Scott	2300 Curlew Road, Suite 201 Palm Harbor, FL 34683	B Add
			□ Remove
		<del></del>	☐ Change
D	John L Waby	2300 Curlew Road, Suite 201 Palm Harbor, FL 34683	<b>B</b> Add
			☐ Remove
			Change
<del></del>			Add
			Remove
			Change
			Remove
		-	□ Change
			Add
			☐ Remove
			Change

Effective date, if other than the date of filing:  (If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02074.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records.
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b) The 90th day after the record is filed.
Dated
Signature of a member or authorized representative of a member
<b>,</b>

Page 3 of 3

Filing Fee: \$25.00