L19000001165

(Requestor's Name)
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(Address)
,
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
<u> </u>
Continued Continued Chapter
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COVER LETTER

TO: Registration Se Division of Con	rporations		*
SUBJECT:	Name of Lin	nited Liability Company	20 25,27
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	Ş
Please return all correspo	ondence concerning this matter	to the following:	· ·
		I. Wagner Name of Person	
	Law Office	Firm/Company	I. Wagnes, P. A
	320 SE 19	Address Address	
	F.F. Laco	City/State and Zip Code City/State and Zip Code City/State and Zip Code Coc/th/S 4/10/52 to be used for future annual report noti	33316 5. Co/7 fication)
For further information c	oncerning this matter, please e		
Jaroka Name o	Magnes Person	at (<u>957</u>) <u>4/9</u> Area Code Daytim	c Telephone Number
Enclosed is a check for the	ne following amount:		
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroc Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ARTICLES OF	AMENDMENT
TO A DITION FOR OF O	O SOCIALIZATION
ARTICLES OF O	A) PS
STN Grove LL	CC 4
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.)
	12/27/18
The Articles of Organization for this Limited Liability Company	were filed on $\frac{10}{9}$ and assigned
Florida document number <u>L/900001165</u>	
This amendment is submitted to amend the following:	
A. If amonding name autor the naw name of the Einterd links	1124
A. If amending name, enter the new name of the limited liab	mity company nere:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company " the designation "LLC" or the abbreviation "LLC"
	ty company. The designation label of the above viation label.
Enter new principal offices address, if applicable:	7:0
(Principal office address MUST BE A STREET ADDRESS)	
	22 50 410 7 10 01 01
Enter new mailing address, if applicable:	Beilding 10 Box 5 Page 200 Beach, Fa 33069
(Mailing address MAY BE A POST OFFICE BOX)	Building 10 Bay 3
	Parano Beach, FL 33067
B. If amending the registered agent and/or registered office a	address on our records, enter the name of the new registered
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Title Name Address Type of Action Mgs Tonyo White 4957 New 48 Are DAdd

Coccont Create Fl 3273 TREMOVE Mgr Mancy Keel 7787 Golf Croke Orice DAdd Margak Fl 33063 Change _____ □Add ____ Change ____ Change □∧dd _____ Remove _____ DAdd _____ Remove

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effect	ive date, if other than the date of filing:
(il an el	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a
docum	ent's effective date on the Department of State's records.
he recor ord is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
O. G. 13 7,	
Dated	11/20/20
	\bigcirc
	Signature of a member or authorized representative of a member
	Nancy Keel Typed or printed name of signee
	Manon Keel