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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT: 849 Beach Ro	ad LLC
wate of Em	inted Elability Company
The enclosed Articles of Amendment and fee(s) are sul	omitted for filing.
Please return all correspondence concerning this matter	to the following:
Joseph (Signature of Person
GUZZO EI	tctric_LLC Firm/Company
28621 N.	Ditsel Dr. Address
Bonita s	prings, FL 34135 City/State and Zip Code
_	QUZZOEIECTFIC.COM (tobb used for future annual report notification)
For further information concerning this matter, please of	eall:
Gabrielle Guzzo	at (139) 301-4174
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

849 Brach	Road, LLC
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compare Florida document number	ay were filed on 11112019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Lial	
Enter new principal offices address, if applicable:	28621 N. Diesel Drive Bonita Springs, FL 34135
(Principal office address MUST BE A STREET ADDRESS)	Bunita springs, FL 34135
Enter new mailing address, if applicable:	28621 N. DIESEL Drive
(Mailing address MAY BE A POST OFFICE BOX)	Bonita springs, FL 34135
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address: 2862	IN. DIESEL Drive Enter Florida street address
<u>Boni t</u>	a springs, Florida 34135 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 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>	Address	Type of Action
MOR	Joseph Guzzo	28621 N. Ditst1 Dr.	□Add
		Bonita Springs, FL 34139	□Remove
		34135	5
			address (address
			□Add
			□Remove
			□Change
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		Signs	ture of a me	ember or autho	rized represe	fative of a me	ember		_
		Signi	itale of a file		•	* /			

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Filing Fee: \$25.00