L1900048115

(Req	uestor's Name)	
bbA)	ress)	
(Add	ress)	
(City)	State/Zip/Phone	#)
		MAIL
(Busi	iness Entity Nam	le)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
	Office Use Only	



04/25/19=-01011+-001 **25.08

S TALLENT

MAY 0.9 2019

FILED 2019 APR 25 PH 5: 32 SECRET VEY OF STATE SECRET VEY OF STATE

Amend

:	· .		
	(COVER LETTER	
TO: Registration So Division of Co			
	HOLLAND LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
	MICHELE HOLLAND		
		Name of Person	
	MICHELE HOLLAND LI	.C	
		Firm/Company	
	412 RACCOON ST		
		Address	
	LAKE MARY FL 32746		
	MHOLLAND412@GMAII	City/State and Zip Code	
	_	to be used for future annual report notif	ication)
For further information c	concerning this matter, please ca	all:	
MICHELE HOLLAND		407 761-5906	
Name e	of Person		Telephone Number
Enclosed is a check for t	he following amount:		
\$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)
Regist	ING ADDRESS: ration Section on of Corporations	STREET/COURI . Registration Section Division of Corpora	1
P.O. B	ox 6327 assee, FL 32314	Clifton Building 2661 Executive Cer Tallahassee, FL 323	nter Circle

•

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

MICHELE HOLLAND LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on $\frac{02/18/2019}{2}$ and assigned Florida document number 1.19000048115

This amendment is submitted to amend the following:

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 designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:	S	20	
(Principal office address MUST BE A ST <u>REET ADDRESS)</u>		1A 6	
		PR 2	
		ъ.	1
Enter new mailing address, if applicable:	500 500	РМ	30
(Mailing address MAY BE A POST OFFICE BOX)		ង់	
		-32	

B. If amending the registered agent and/or registered office 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 add	lress
	 City	Florida 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

•

٠

<u>Title</u>	Name	Address	Type of Action
MGR	MICHELE HOLLANÐ	412 RACCOON ST Lake Mary, FL 32746	🗖 Add
			Remove
			Change
			Add
			Remove
			Change
			🖸 Add
			Remove
			Change
			Add
			Change
			🖸 Add
			Remove
			Change
			Add
			Remove
			Change

. • •	•	•			
D. If am	ending any oth	ner information	, enter change(s) here:	(Attach additional sheets,	if necessary.)

		 		-	
		 			
		-			
···· •	· · · ·				
		_			
		 	-, ,		

E. Effective date, if other than the date of filing: _______(optional) (If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated	2019
	Michele Holland Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

MICHELE HOLLAND	-Pada
-----------------	-------

Typed or printed name of signee

Elling Ecol. \$25.00