1190000 63370

(F	Requestor's Name)
Ã)	address)
(A	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(C	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:

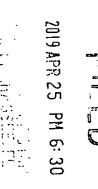
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C. GOLDEN APR 2 5 2019

COVER LETTER

TO:		stration Sec sion of Corp			
el:Die		GO STUVE			
SUBJE	CI:		Name of Lim	ited Liability Company	
The enc	closed	Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please t	return a	ıll correspoi	ndence concerning this matter	to the following:	
			Brendan Stuver		
			GO STUVER RE LLC	Name of Person	
			12301 Lake Underhill Rd =	Firm Company	
			Orlando, Florida 32828	Address	
			stuversold@gmail.com	City/State and Zip Code	
			E-mail address: (to be used for future annual report notif	ication)
For furt	ther int	ormation co	oncerning this matter, please co	dl:	
Brenda	n Stuv	er		786 2141053 at () Daytime	
		Name of	Person	Area Code Daytime	: Telephone Number
Enclose	ed is a	check for th	e following amount:		
\$25	5.00 Fil	ing 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 tadditional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



April 15, 2019

BRENDAN STUVER 12301 LAKE UNDERHILL ROAD #111 ORLANDO, FL 32828

SUBJECT: GO STUVER RE LLC Ref. Number: L19000063370

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 019A00007602

Claretha Golden Regulatory Specialist II

RECEIVED

019 APR 25 PH 3: 4.1 经经验。

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

FILED

2019 APR 25 PM 6: 30

GO STUVER RE 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 $\frac{3/5/19}{-}$ and assigned Florida document number 119000063370 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BRENDAN STUVER, LLC The new name must be distinguishable and contain the words "Limited Liability 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 address _, Florida _

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			Remove
			Change
			Add
			☐ Remove
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`an effe <u>Sote:</u>	ve date, if other than the date of filing:
The	ord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier α 90th day after the record is filed.
ated	04/22/19, April 22nd. 2019.
_	0 1 8
	Duly to

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00