## 110000 134 468

(Requestor's Name)
(Address)
(Address)
, , ,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
·
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>

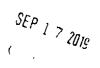
Office Use Only



300333379133

09/09/19--01025--019 \*\*25.00





## **COVER LETTER**

SUN COU SUBJECT:	Name of Lim	ited Liability Company	
	value of falls	ned Ballinty Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	DANIEL D. WHITAKER.	ESQ.	
		Name of Person	<del></del> _
	CAREY, O'MALLEY, WI	IITAKER, MULLER, ROBERTS &	& SMITH, P.A.
	-	Firm/Company	<u> </u>
	712 S. OREGON AVE, STE 100,		
	-	Address	
	TAMPA, FL, 33606		
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
Name of Person		at ()	: Telephone Number
Epclosed 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

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

(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 Compan Florida document number L19000134468	y were filed on <u>05/17/2019</u>	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 Liab	bility 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)		2019	
		<u> </u>	
		P-9 PH	
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		<del></del>	
		<u> </u>	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		s, enter the name of the	
Name of New Registered Agent:		-	
New Registered Office Address:	Enter Florida street addres		
	Enter r toriaa street adaress		
		orida	
	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 a 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MOD	Bethany Pagliarulo	70 Bahama Cr Tampa, FL 33606	
MGR			
			■ Remove
			☐ Change
			Add
			□ Remove
			Change
			Remove
			Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change

-	
-	
-	
-	
-	
-	
-	
_	
-	
-	
-	
-	
•	
	<del></del>
(If an ef <u>Note:</u>	ive date, if other than the date of filing:  9-5-19  (optional)  fective 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  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	2019  Daniel Whitaker/le  Stignature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	DANIEL D. WHITAKER, ESQ.  Typed or printed name of signee
	Typed or printed name of signee

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00