L 19000/38985

Reduin Collington TR			
1313 (Address) 37 hway			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
EIVEI 12 Ph I			
RECONDING SEPTI			
75			

Office Use Only



800330878938

09/18/19--01030--001 **25.00

3 SEP 16 PM 2: 45

9/17/19

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

V	SC E
(Name) of the Limited Liability Compar (A Florida Limited I	were filed on 5/23/19 and assigned 5
The Articles of Organization for this Limited Liability Company Florida document number 1900138985.	were filed on 5/23/19 and assigned 5
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty 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 of 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:	City Zip Code
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete	

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

Y'M

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>	Name	Address	Type of Action
MGR	Mohin Collington 30	1313 13th way WPB,F1.3	340V 1
			□ Remove
		, <u></u>	Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			D Add
			Remove
			Change
			□ Add
			Remove
			Change
			□ Add
			_□ Remove
			Change

D. If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)
· · · · · · · · · · · · · · · · · · ·	
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to d Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	(optional) are of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) statutory filing requirements, this date will not be listed as the
If the record specifies a delayed effective date, but not a (b) The 90th day after the record is filed.	n effective time, at 12:01 a.m. on the earlier of:
Dated 9/17/19	
Num buling	representative of a member
Typed or printed n	
Page 2	first last

Page 3 of 3

Filing Fee: \$25.00