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COVER LETTER

то:	Registration Sec Division of Corp	tion porations		ė.
SUBJEC	TT:		ed Liability Company	
The encl	osed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please re	turn all correspor	dence concerning this matter to	o the following:	
		Christ	Hon D LOPez-	
			Firm/Company	
		2010 West	Heenesste ST	· · · · · · · · · · · · · · · · · · ·
		Tallahassee	-71 -30312 City/State and Zip Code	
			hasser and to be used for future and ust report notific	
For furth	er information co	ncerning this matter, please cal	II:	
	hristian Name of	Person	at (<u>Vo /</u>) <u>572 - 6</u> Area Code Daytime	78 / Telephone Number
Enclosed	is a check for the	e following amount:		
□ \$25.0	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 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

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211 GOOD CON

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

	City		Zip Code		
			Florida		
	Enter Florida street address				
New Registered Office Address:					
Name of New Registered Agent:					
B. If amending the registered agent and/or registered agent and/or the new registered office a		s on our reco	rds, <u>enter the name of the new</u>		
(Mailing address MAY BE A POST OFFICE BOX					
Enter new mailing address, if applicable:			-1-11		
(Principal office address MUST BE A STREET AL	DDRESS)				
Enter new principal offices address, if applicable:					
The new name must be distinguishable and contain the words	Limited Liability Company."	the designation "I,	LC" or the abbreviation "L.L.C."		
Followed 95	002 110				
A. If amending name, enter the new name of the	-	n haen			
This amendment is submitted to amend the following	F.				
Florida document number <u> </u>	<u></u> .				
The Articles of Organization for this Limited Liabilit	ty Company were filed o	$\sqrt{\frac{0.3-17}{1}}$	and assigned		

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member Title Name Address Type of Action _□ Add □ Add ____ Remove ______ □ Change ______ Bemove \square Add _____ Change ☐ Remove _□ Change

•	
(If an e <u>Note</u>	ve date, if other than the date of filing:
the reb) Th	ord 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.
	7/15 2019.
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00