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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(55	Emily Han	,
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

FO: Registration Se Division of Corp			
SURJECT: SI	DLM COZICHING Name of Light		
3015/EC1.	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
	ndence concerning this matter t		
	Andrea	Lindw 2)	
	SDLM 60	21Ching Firm/Joinpany	
	2311 NE	53rd St. Address	
	Andrezi. L	erdale FL 3330 City/State and Zip Code and Wall @ gmall. o be used for future annual report noti	108 Lom.
For further information c	oncerning this matter, please ca	ill:	
Andr Name o	L71. of Person	at (<u>994)</u> <u>812 8</u> Area Code Daytim	7-81 ne 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)
Mailing Addre Registration	Section	Street Address: Registration Se	
Division of C P.O. Box 632		Division of Co The Centre of	-

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPLM WZICKING L (Name of the Limited Liability Comp	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company		and assigned
Florida document number <u>L19 000 175816</u> . This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2311 NE 53:2t St Ethauderdale	
THE CHAIN OFFICE MADE STORE FOR THE PROPERTY OF THE PARTY	PL 33308	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2311 NE 53rd St Fl. Lauderdake	
	FL 33308	292
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	·	P
New Registered Office Address:	Enter Florida street address	
	, Florida	·
	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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			□Change
			□Remove
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(If an effective d Note: If the o	ate is listed, the d date inserted in	date must be spec i this block doc	rific and cannot be	oplicable statutor	ig or more than 90.	(optional) days after filing.) Purs lents, this date will	numt to 605,0207 (not be listed as t
ne record speci ord is filed.	fies a delayed (effective date. I	but not an effecti	ve time, at 12:01	a.m. on the earl	ier of: (b) - The 90t	h day after the
Dated	March	<u> </u>	207	<u> </u>			
		Signatu	dudll ne of a member of	authorized represe	ntative of a memb	er	