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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	-





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JAN 28 2017

COVER LETTER

TO: Registration Sec Division of Corp						
SUBJECT:	LEVELAGE WIUDO	us LLC				
Sonat.et.		ited Liability Company				
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspon	ndence concerning this matter	to the following:				
	CHCISTOPHER STERRY Name of Person					
	L	EVELAGE WILLOWS LLC Firm/Company				
		, .				
		Address	FC 33133			
						
	CHEXS & LEIGER	City/State and Zip Code • E www. com to be used for future annual report not	itication			
For further information co	oncerning this matter, please c		Treatival,			
CHRES SPECE	<u> </u>	at (<u>305</u>) <u>989</u> Area Code Daytin	-5323			
Name of	t Person	Area Code Dayun	ne Telephone Number			
Enclosed is a check for th	ne 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 Addres		Street Address:	nation			
Registration Section Division of Corporations		Registration Section Division of Corporations				
P.O. Box 632	7	The Centre of	Tallahassee			
Tallahassec, I	FL 32314	2415 N. Monro	oe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Company as it now appears on our limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{08/02/2019}{\text{Elorida document number}}$.	
ed liability company here:	
ed Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
N/A	20, SEA
ESS)	
	22 N ==
N/A	P (T)
	<u>551 35</u>
office address on our records,	enter the name of the new registe
Enter Florida street	address
12.10. 1 12.10. 13.10. 13.10. 13.10. 13.10. 13.10. 13.10. 13.10. 13.10. 13.10. 13.10. 13.10. 13.10. 13.10. 13.	
City	, Florida Zip Code
	mpany were filed on 08/02/2019 ed liability company here: ed Liability Company," the designation N/A ESS)

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>	Name	<u>Address</u>	Type of Action
CEO	Christopher Sperry	223 Washington Drive	■Add
		Coral Gables, FL 33133	□Remove
			☐ Change
COO	Benjamin Davis	17903 SW 89th Place	≣Add
		Palmetto Bay, FL 33157	□Remove
			Change
			Ramove—
			D : □Add
			□Remove
			□Change
			□Remove
			Change
			□Add
			□Remove
			□Change.

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Effective date, if other than the If an effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the D	ock does not meet	t the applicab	date of filing o	r more than 90 d ling requireme	_ (option lays after fil ents, this d	al) ing.) Purs ate will i	uant to 6 10t be li	05.0207 sted as
ne record specifies a delayed The 90th day after the rec		e, but not	an effectiv	e time, at 1	2:01 a.r	m. on t	he ear	lier of
Dated	2	2020						
(Lunk)	<u> </u>		_ •					
		 						
	Signature of a men	nber or authori	ized representa	live of a membe	r			

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Filing Fee: \$25.00