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COVER LETTER

TO: Registration Section Division of Corporations

ADH MOR ORT LEC SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and tee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JESSICA G. MCGREW

Name of Person

JESSICA G. MCGREW, P.A.

Firm/Company

2810 REMINGTON GREEN CIRCLE

Address

TALLAHASSEE, FL 32308

City/State and Zip Code JEFFREY.WOODBURN@GMAIL.COM

E-mail address: (to be used for future annual (epoit notification)

For further information concerning this matter, please call:

JESSICA MCGREW

Name of Person

at (_____) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

Regist Divisi P.O. E	\$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)	
	ING ADDRESS: ation Section on of Corporations bx 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	on rations enter Circle		

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION** OF

288 NOV -5 PH 2:51

FILED

ADH MOR ORT LLC		WITARY & STATE
ADH MOR ORT LLC (<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jability Company)	AHASSEE FLORION
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000233435</u>		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "E.L.C."
Enter new principal offices address, if applicable:	·	
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	•	

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street aa	1.1
	enter r toriau street aa	
		, 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 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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	RYAN WEST	204 S. MONROE ST. SUITE 201 TALLAHASSEE, FL 32301	🛛 Add
			🖻 Remove
			Change
			🛛 Add
			Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated_Nov. 2019 Signature of a member or authorized representative of a member Lessica G McGrew as Attorney for JEFFREY WOODBURN, AUTHORIZED MEMBER

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00