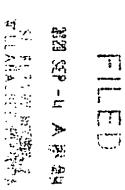
L19000306887

	equestor's Name)	
	ddress)	
	ddress)	
(C	ity/State/Zip/Phone	#)
_	☐ WAIT	_
(B	Business Entity Name	e)
(C	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	n Filing Officer	
Special Instructions to	o Filing Officer:	

Office Use Only



200351339152



00T : 0 0020 TO LT (150M)

COVER LETTER

TO:	Registration Se Division of Cor	ction porations	•	^ •
SUBJE	Glasrail, LI	.C ,		
30001		Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Craig Tompkins		
			Name of Person	
		Craig Tompkins, PLLC		
		<u>-</u>	Firm/Company	
		2269 Acorn Palm Rd		
			Address	
		Boca Raton, FL 33432		
		et@craigtompkins.com	City/State and Zip Code	
			to be used for future annual report no	tification)
For fur	ther information c	oncerning this matter, please co	all:	
Craig 7	Fompkins		561 271-4868	
	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclose	ed is a check for th	ne following amount:		
□ \$ 2:	5.00 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 Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Glasrail, LLC			
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)			
The Articles of Organization for this Limited Liability Company were filed on 12/17/2019		_ and as:	signed
Florida document number L19000306887			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LI.C" of	the abbre	viation "L	.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)			
	57 A		
B. If amending the registered agent and/or registered office address on our records, enter the agent and/or the new registered office address here:	name o	f the ne	w registere
agent and/or the new registered office address here.	-	ו	
		E	ارسشسة إ
Name of New Registered Agent:	- 1/4 - X-1	-}-	F
New Registered Office Address:	清	奈	1 ,,
Enter Florida street address	¥,	12 21	_
, Floric			
City		Zip Code	

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>	<u>Name</u>	Address	Type of Action
AMBR	Ginger Holliday	264 Fern Palm Rd	□Add
		Boca Raton, FL 33432	≣Remove
			□ Change
			□Remove
			Change
			□Add
			□Remove
			□ Change
			🗆 Add
			Remove
			□Change
			□ Add
			Remove
			□Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□ Remove
			□C'hange

D. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
-	
-	
-	
-	
-	
,	
_	
·	
-	
Note:	ive date, if other than the date of filing: [12/17/2019] [betive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the tent's effective date on the Department of State's records.
If the recordis fi	d 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 led.
Dated	9 Sopt. 3 2020.
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Joseph G. Wortley, Jr.

Filing Fee: \$25.00

Typed or printed name of signee