L20 0000 38177

(Re	equestor's Name)			
(Ac	ldress)			
(Address)				
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	_			
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(Business Entity Name)				
(Document Number)				
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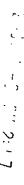




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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:	LAURA SH	EVLIN LLC	-	
Name of Limited Liability Company , .				
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
	Lai	Laura M Shevlin Name of Person		
	LAURA SHEVLIN LLC Firm/Company			
	2200 SW Longwood DR.			
	Diagon	1 1 1 211000		
	Talm Cr	City/State and Zin Code	<u> </u>	
		City/State and Zip Code hevint Cognicion to be used for future annual report notifi		
For further information e	oncerning this matter, please ca	dh:		
Laura	M Sheviin	**(77a, 267-	5450	
	f Person	at (772) 267-1 Area Code Daytime	Telephone Number	
Enclosed is a check for the	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 Registration S		Street Address: Registration Sec	tion	
Division of C	orporations	Division of Corp	porations	
P.O. Box 6327		The Centre of Ta	allahassee	

2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 0/-3/-2020 and assigned Florida document number L20000038177 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 "LLC" or the abbreviation "LLC." 2200 SW Longwood Dr. Enter new principal offices address, if applicable: Palm City, Fl. 34990 (Principal office address MUST BE A STREET ADDRESS) 2200 SW Longwood Dr. Enter new mailing address, if applicable: Palm City, Fl. 34990 (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 address

New Registered Agent's Signature, if changing Registered Agent:

Laura Shevlin LLC

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
MGR Aaron Shevtin	Aaron Shevlin	2200 SW Longwood Dr.	∐Add
		Palm City, Fl. 34990	Remove
			□ Change
		🗀 Add	
		□Remove	
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		□Change	
		□Add	
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		□Change	
		□Add	
		□Remove	
		□ Change	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) The new Address is: 2200 SW Longwood Dr. Palm City, Fl. 34990 E. Effective date, if other than the date of filing: ___ (If an effective 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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 07/01 2020 Signature of a member or authorized representative of a member Laura Shevlin AMBR Typed or printed name of signee

. . . .

Filing Fee: \$25.00