## L20 000105987

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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CC:

JUN 23 2020

## **COVER LETTER**

Division of Corp	oorations		
subject:\333	13 Gulf Blvd (	36 LLC	<u>-</u>
	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Hector Co	Name of Person	
	13343 Gu	Fim/Company	
	<u>3903 Wor</u>	Hole Blud. Stc. 1002 Address	· · · · · · · · · · · · · · · · · · ·
	Tampa, EL	33624 City/State and Zip Code	
	HCC Tampa E-mail address: (1	to be used for future annual report notif	lication)
For further information co	oncerning this matter, please ca	ail:	
Hickory Contra	100	at ( & (% ) \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	G
Name of	Person	at ( <u>313</u> ) <u>426-21</u> Area Code Daytime	e Telephone Number
Enclosed is a check for the	e 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 Address Registration S		Street Address: Registration Sec	ction

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Registration Section** 

TO:

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

1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	00	2012.j Ji. 1-8 Pli 6: 44
13343 Guf Blvd (Name of the Limited Liabilit (A Florida	V Company as it now appe	ears on our records.)
(A Florida	Limited Liability Company	·)
The Articles of Organization for this Limited Liability Co		4/17/2020 and assigned
Florida document number <u>L2000/05987</u>	_·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company	here:
13343 GUE BUN 135	8110	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the	e designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>	
Enter new mailing address, if applicable:	<del></del>	
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
B. If amending the registered agent and/or registered	office address on our	r records, <u>enter the name of the new registers</u>
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida street address
	<del></del>	, Florida Zip Code
	City	2.ip 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:

AMBR =	Manager Authorized Member		
<u>Title</u>	Name	Address 2020 JC 1-8 FH 6: 1/4	Type of Action
mak	Name Lyle Tapinos		□Add
		11103 Winthrop Way Tampa fr 3	KIZ Kemove
	$\zeta_{\mathcal{E}_2}$		□Change
mal	LOT Invistments LAD	1718 Capital Are Cheyenne, Wyoming 82001	QXAdd
			□Remove
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an effective date, if other than the date of filing: 4 17 220 an effective date is listed, the date must be specific and cannot be prior to date of filitote: If the date inserted in this block does not meet the applicable statuto ocument's effective date on the Department of State's records.	(optional) ing or more than 90 days after filing.) Pursuant to 605.0207 ory filing requirements, this date will not be listed as
record specifies a delayed effective date, but not an effective time, at 12:0 lis filed.	11 a.m. on the earlier of: (b) The 90th day after the
ated 5/31/2020	