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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: POYTO Tilos Same of	Stations L.C. TLimited Liability Company	
The enclosed Articles of Amendment and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
For further information concerning this matter, please Manuel Formation of Person Roland Ro	1'	22 SEP 23 AM 9: 23
Enclosed is a check for the following amount:		
■ \$30.00 Filing Fee & Certificate of Status	is Certified Copy Certificat (additional copy is enclosed) Certified	te of Status &
Mailing Address: Registration Section	Street Address: Registration Section	

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

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

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Company	were filed on OUISING	and assigned
Florida document number 88-3434482.	were med on	ind tossigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abb	previation "L.L.C,"
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	30215 SW 1584 Homostcod F	NC+ 133033 e of the new registered
		. 22
Name of New Registered Agent:		. S
New Registered Office Address:		23 72
	Enter Florida street address	A Si.
New Registered Office Address: Enter Florida street address Florida	Zip Kode 2007	
New Registered Agent's Signature, if changing Registered Agent:		એ ફૂલ
I hereby accept the appointment as registered agent and agro provisions of all statutes relative to the proper and complete	, , ,	

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
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in effective date is listed, the date office: If the date inserted in the	is block does not n	neet the applica				
eument's effective date on t	he Department of S	State's records.				
ecord specifies a delayed eff	ective date but not	an effective tin	ne at 12:01 a.m. <i>c</i>	on the earlier of: (b)	The 90th day afte	er the
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,	signature of a l	memberior against	izea representative	or a member		