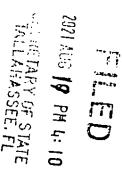


(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





08/19/21--01015--029 **30.00



COVER LETTER

TO: Registration Section of Corp.				
SUBJECT: Stro	ng Investmer Name of Limite	d Liability Company		
The enclosed Articles of A	mendment and fee(s) are submi	tted for filing.		
Please return all correspon	dence concerning this matter to	the following:		
	AmyVanto	ssen		
	Amy B Var	Name of Person Fosse P.A. Firm/Company	<u>. </u>	
	1696 W. +	Libis Cus Blud	Unit A	
	Mel bour	City/State and Zip Code	2901	
	AnyBVa E-mail address: (to	Fossen @ On be used for future annual re	port notification)	
For further information co	ncerning this matter, please call	:		
Any Va	n Fossen Person	at (<u>324</u>)	345-594 Daytime Telephor	5 ne 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 enclo		\$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

(Name of the Limited Liability Compa	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L990000 1131</u> .	were filed on 10-25-59 and assigned
This amendment is submitted to amend the following:	707
A. If amending name, enter the new name of the limited liab Shong Investments, L.L.	(
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	11ty Company," the designation "LLC" or the abbreviation "LLC." 2930 Bush Diggs Melborne, 7-C 32434
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2930 Bush M. Melbourne, 7L32934
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	d W. armstrong
New Registered Office Address: 2936	Enter Florida street address 2393
	City Sip Code
Nam Desistand Agent's Signature if changing Peristered Agent	,

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
•			□ Remove
		□ Change	
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		□Change	
			□Add
		Remove	
			☐ Change
		□ Add	
			Remove
			□ Change

If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
-	
_	
Note: If	e date, if other than the date of filing:
ne record ord is filed	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 d.
Dated _	Aug 16 2021
	Signature of a member or authorized representative of a member
	David W. Arnstrong Typed or printed name of signee