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

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TO:

Registration Section Division of Corporations

| A&D Dryo SUBJECT: | ut Services, LLC | - | |
|-------------------------------|--|--|---|
| SOBJECT, | Name of Lim | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ndence concerning this matter | to the following: | |
| | Angelica Sigler | | |
| | | Name of Person | |
| | | Firm/Company | _ |
| | 15757 Pines Blvd #123 | Address | - <u>-</u> |
| | Pembroke Pines, Fl. 33027 | | |
| | angiesigler21@yahoo.com | City/State and Zip Code | . |
| | _ . | to be used for future annual report noti | fication) |
| For further information co | oncerning this matter, please co | all: | |
| Angelica Sigler | | 786 442-0562 at () | |
| Name o | Person | Area Code Daytim | e Telephone Number |
| Enclosed is a check for th | e following amount: | | |
| □ \$25.00 Filing Fee | ■ \$30.00 Filing Fee & Certificate of Status | S55.00 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 | Section | <u>Street Address:</u> Registration Se | ction |
| Division of C P.O. Box 632 | • | Division of Cor The Centre of T | • |
| Tallahassee, I | | | e Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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A&D Dryout Services, LLC

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(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 03/12/2015 | and assigned |
|---|--|----------------------------|
| Florida document number L15000044880 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | oility company here: | |
| The new name must be distinguishable and contain the words "Limited Liabi | ility Company," the designation "LLC" or | the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 16700 NW 27 Ave | |
| (Principal office address MUST BE A STREET ADDRESS) | Miami Gardens, Florida 33056 | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, <u>enter the</u> | name of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Florid | da |
| | City | Zip 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.

| AMBRE A | Authorized Member | • | | |
|--------------|-------------------|-------------|--------------------|----------------|
| <u>Title</u> | Name | Address | American State | Type of Action |
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| fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to the: If the date inserted in this block does not meet the application of state in the date on the Department of State is records. | (optional) to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (able statutory filing requirements, this date will not be listed as the |
| ecord specifies a delayed effective date, but not an effective tin is filed. | ne, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| ated abotions 5 WW, 2021 | _ · |
| | |
| Signature of a member or author | rized representative of a member |

Typed or printed name of signee