## ote. Please print this page and use it is a cover sheet. Type the fax audit number

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(((H230002194503)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PAGIO'S & ASSOCIATES, LLC

Account Number : I20100000043 Phone : (305)397-8553 : (305)397-8521

ter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HUSKY ALASKA SOLUTIONS, LLC

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SUBJECT:	₹	Name of Lin	nited Liability Company	<u> </u>	
The enclosed	i Articles of	Amendment and fec(s) are sub	omitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		JAYDE J. SANTANA S	IERRA		
			Name of Person		
		HUSKY ALASKA SOLU	ITIONS, LLC		
			Firm/Company		
	7005 NE 5TH AVE, APT 2				
			Address		
		MIAMI, FLORIDA 33138	3		
			City/State and Zip Code		
		JESSENIASANTANA@G		×	
			to be used for future annual report noti	dication)	
or further in	formation co	oncerning this matter, please c	all;		
AYDE J. S	ANTANA S	SIERRA	786 812 6493 at ( )	3	
	Name of	Person		Telephone Number	
nclosed is a	check for the	e following amount:			
≅ \$25.00 P	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Pee, 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

Jun. 20. 2023 10:39AM

No. 1017 P. 3 H23000219450 3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HUSKY ALASKA SOLUTTO		
(Name of the Limited Liability Company as (A Florida Limited Liabilit	it now appears on our records.) by Company)	
The Articles of Organization for this Limited Liability Company were	filed on06/07/2023 ar	nd assigned
Florida document numberL23000275212		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability c	ompany here:	
The new name must be distinguishable and contain the words "Limited Liability Con	mpany," the designation "LLC" or the abbreviati	on "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)		2022
		فتت
<del>-</del>		٠
B. If amending the registered agent and/or registered office addres	ss on our records, enter the name of th	e new registe
agent and/or the new registered office address here:	<u> </u>	-p
	`	<b>I</b>
Name of New Registered Agent:		<del></del>
	5.	r 70
New Registered Office Address:	Enter Florida street address	
	Tairet 1 lotura arees arm e22	
	, Florida	
C)	itv 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.

Jun. 20, 2023 10:39AM H23No. 101794ft. 43

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
AMBR	JAYDE J. SANTANA SIERRA	7005 NE 5TH AVE	⊟Add
		APT 2	□Remove
		MIAMI, FL 33138	□Change
			□AbA
			□Remove
			□Change
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(If an effective Note: If the	ate, if other than the dat date is listed, the date must be e date inserted in this block effective date on the Depar	specific and cannot be prior does not meet the applic	to date of filing or mor able statutory filing :	(optional e than 90 days after filing requirements, this date	z.) Pursuant to 605.0207 (3)
he record spe ord is filed.	cifies a delayed effective da	te, but not an effective ti	me, at 12:01 a.m. on	the carlier of: (b) T	he 90th day after the
Dated	JUNE 20	2023	·		
	<del>.</del>	740 TOMBUS (ANY 38, 1823 30.87 \$27)			
-	Sign	nature of a member or autho	orized representative of	a member	<del></del>
		JAYDE J. SA	NTANA SIERRA		
-			ed name of signee		

Filing Fee: \$25.00