

L15000060636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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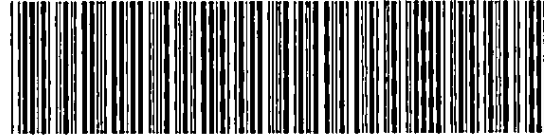
(Business Entity Name)

(Document Number)

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11/13/18 DS



# SWATA



INTEGRITY • EFFECTIVE • INNOVATION

November 1, 2018

FLORIDA DEPT OF STATE  
DIVISION OF CORPORATIONS  
Registration Section  
Division of Corporations  
Clifton Bldg.  
2661 Executive Center Circle  
Tallahassee, FL 32301

TO WHOM IT MAY CONCERN:

SWATA, LLC is requesting to make the following (Articles of Amendment to Articles of Organization) changes to remove James R. Wiggins, and to remove Tommy Evans from record for SWATA, LLC, and to add Christopher U. Fleury as the Owner of SWATA, LLC. Also, to update the Florida office of record to 4720 Salisbury Road, Jacksonville, FL 32556.

Please mail any correspondence to Swata Headquarters at 9111 Edmonston Road, Suite 304, Greenbelt, MD 20770.

Sincerely,

Christopher U. Fleury

Owner/CEO

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MARYLAND: 9111 Edmonston Rd. Suite 304 Baltimore, MD 20770  
P: 410-988-3426

VIRGINIA: 944 S Wakefield St Suite 200, Arlington, VA 22204  
P: 571-406-5321

WASHINGTON DC: 1411 H ST NE, Washington DC, 20002  
P: 202-400-3712

FLORIDA: 2460 5<sup>th</sup> AVE N, St. Petersburg, FL 33713  
P: 813-606-4838

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

SWATA, LLC

(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 April 07, 2015 and assigned Florida document number L15000060636.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

4720 Salisbury Road

**(Principal office address MUST BE A STREET ADDRESS)**

Jacksonville, FL 32256

**Enter new mailing address, if applicable:**

9111 Edmonston Road, Suite 304

**(Mailing address MAY BE A POST OFFICE BOX)**

Greenbelt, MD 20770

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Christopher U. Fleury

New Registered Office Address:

4720 Salisbury Road

*Enter Florida street address*

Jacksonville

Florida 32556

*City*

*Zip Code*

**w Registered Agent's Signature, if changing Registered Agent:**

*reby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ig filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability pany has been notified in writing of this change.*

  
\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Type of Action</u>
Mgr.	James R. Wiggins, Jr.	2460 5th Ave. N St. Petersburg, FL 33713	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
Owner	Christopher U. Fleury	4720 Salisbury Road Jacksonville, FL 32256	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
Mgr.	Tommy Evans	5515 24th Ave. Palmetto, FL 34221	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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Information, enter change(s) here: (Attach additional sheets, if necessary.)

Lined area for providing information or changes.

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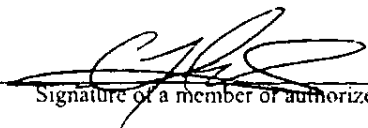
**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
a) The 90th day after the record is filed.

Dated November 1 2018

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Christopher U. Fleury  
\_\_\_\_\_  
Typed or printed name of signee