

h05 0000002715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

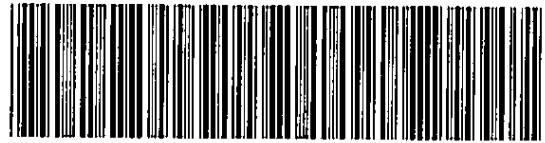
(Business Entity Name)

(Document Number)

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FILED  
CLERK OF STATE  
DIVISION OF CORPORATIONS  
22 MAY 24 PM 12:30

T. MATTHEWS

JUL 28 2022

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** American Sand Blasting LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gordon Duncan

\_\_\_\_\_  
Name of Person

Duncan & Associates, P.A.

\_\_\_\_\_  
Firm/Company

PO Box 249

\_\_\_\_\_  
Address

Fort Myers, FL 33902

\_\_\_\_\_  
City/State and Zip Code

[gordon@duncanassociatesfl.com](mailto:gordon@duncanassociatesfl.com)

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gordon Duncan

239

334-4574

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee      ☐ \$30.00 Filing Fee & Certificate of Status      ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)      ☐ \$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 St.  
Tallahassee, FL 32309

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

22 MAY 24 PM 12: 30

American Sand Blasting 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 January 10, 2005 and assigned  
Florida document number L05000002715.

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:

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

8801 Business Park Drive

Suite 211

Fort Myers, FL 33912

Enter new mailing address, if applicable:

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

8801 Business Park Drive

Suite 211

Fort Myers, FL 33912

**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:

David Robilio

New Registered Office Address:

8801 Business Park Drive, Suite 211

*Enter Florida street address*

Fort Myers

Florida 33912

*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.*

David E. Robilio

**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>           | <u>Type of Action</u>                      |
|--------------|---------------|--------------------------|--------------------------------------------|
| MGRM         | Smith, Tracey |                          | <input type="checkbox"/> Add               |
|              |               |                          | <input checked="" type="checkbox"/> Remove |
|              |               |                          | <input type="checkbox"/> Change            |
| MGR          | David Robilio | 9900 Estero Oaks Dr.     | <input checked="" type="checkbox"/> Add    |
|              |               | Apt. 102                 | <input type="checkbox"/> Remove            |
|              |               | Fort Myers, FL 33967     | <input type="checkbox"/> Change            |
| MGR          | Chase Hicks   | 7545 Commerce Street     | <input checked="" type="checkbox"/> Add    |
|              |               | Cocran, MN 55340         | <input type="checkbox"/> Remove            |
|              |               |                          | <input type="checkbox"/> Change            |
| MGR          | Steven Hicks  | 8801 Business Park Drive | <input checked="" type="checkbox"/> Add    |
|              |               | Suite 211                | <input type="checkbox"/> Remove            |
|              |               | Fort Myers, FL 33912     | <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            |

[illegible]

(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)(h)

If the record 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 record is filed.

David E. Roberts  
Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**