

5/6/2021

Division of Corporations

Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

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KEITH BRYAN, LLC**

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* Refax per your enclosed letter - this is a typed Word document - not sure how more legible we can make this - we increased font sizes - Thank you -

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May 7, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KEITH BRYAN, LLC
2704 SE 20TH AVE
OCALA, FL 34471

SUBJECT: KEITH BRYAN, LLC
REF: L06000106451

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Yvette Scott
Document Specialist II

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

FILED
2021 MAY -7 PM 4:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KEITH BRYAN, 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 **November 1, 2006** and assigned Florida document number **L06000106451**.

This amendment is submitted to amend the following:

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

BRYAN MCKINLEY, LLC

Enter new principal office address, if applicable:

Enter new mailing address, if applicable:

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:

New Registered Office Address:

New Registered Agent's Signature, If changing Registered Agent:

I hereby certify 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

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CLERK OF THE COURT
TALLAHASSEE, FLORIDA

C. If Amending Authorized Person(s) authorized to manage, enter the title, names and address of each person being added or removed from our records:

MGR = Manager

AR = Authorized Representative

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<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

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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: (b) the 90th day after the record is filed.

Dated May 4, 2021.

William B. Lovell

Signature of a member or authorized representative of a member

WILLIAM B. LOVELL

Typed or printed name of signer

Filing Fee: \$25.00

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