107000106395

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T. MATTHEWS

JAN 10 2022

COVER LETTER

TO: Registration Section Division of Corpor		;		i
SUBJECT:	LTR NURONI Name of Limit	ed Liability Company		
The enclosed Articles of Ame	endment and fee(s) are subn	nitted for filing.		
Please return all corresponde	nce concerning this matter to	o the following:		
	RICHAL	PD T MURR Name of Person	wy	
	DEIJA	HYDROUS Firm/Company	LLC	
	9100	BOCTON AV	E	
		Oity/State and Zip Code		
_	RICKM (E-mail address: (to	DEUTANYDI be used for future annual r	RO. CCP2 report notification)	
For further information concerning the second concerning to the second		11: at (<u>727</u>) 	861 - 242,	/ Sumber
Enclosed is a check for the for \$25.00 Filing Fee	ollowing amount: 330.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo	Ce osed) Ce	0.00 Filing Fee, ertificate of Status & ertified Copy ditional copy is enclosed)
Enclosed is a check for the fo	ollowing amount:	☐ \$55.00 Filing Fee & Certified Copy	c 266 Ce oscd) Ce	0.00 Filing Fee, artificate of Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	21 026 13 11 3, 30
DEUTA HYDRONIC	5, LLC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company vi Florida document number <u>LO7000106395</u> .	were filed onand assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	·
The new name must be distinguishable and contain the words "Limited Liabilit	y 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)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our records, enter the name of the new registered
Name of New Registered Agent: L/A	
New Registered Office Address:	Enter Florida street address
	Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Address	Type of Action
VP ERIN R. MURRAY	9100 BOTTONAIE, HUDSON FL	(MAdd	
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Remove
			🗆 Change
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			Change
			□Add
			□Remove
			□Change

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ian effec So <u>te:</u> If	e date, if other than the date of filing: TAN 1, 2022 (optional) rive 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records.	020 d a
record l is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after d.	tho
ated _		
	Butard Phunay PRES / MM Signature of a member or authorized representative of a member	
	Signature of a member of audionized representative of a member	

Filing Fee: \$25.00