L01000014623

(Requestor's Name)
(Address)
,
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Codification of Contra
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SAFETY GU	145 11 C
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records.) Ja Lumited Liability Company)
The Articles of Organization for this Limited Liability (Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD.	RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records. en the hameof are new dress here:
	V
Name of New Registered Agent:	
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.

RECEIVED FEB 0 8 2313

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 = Minager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Olgo Cockezell	2343 Stirling Road	> ∧dd
	9	2343 Stirling Read Dania Beach, FL 33312	Remove
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Effective date, if other than the date of filing: (If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 da Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ys after filing.) Pursuant to 605.0207 (3
the record specifies a delayed effective date, but not an effective time, at 12 b) The 90th day after the record is filed.	2:01 a.m. on the earlier of:
Dated	
Signature of a member or authorized representative of a member	
Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00

