

LO9000083108

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

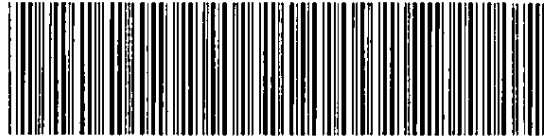
(Business Entity Name)

(Document Number)

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CLERK OF SUPERIOR COURT
2023 JUN 27 AM 11:27

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: U. S. O'Neill Industries, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Warren D. O'Neill

Name of Person

U. S. O'Neill Industries, LLC

Firm/Company

8 E. QUINTETTE RD SUITE B

Address

CANTONMENT, FL 32533

City/State and Zip Code

david.oneill@usoneillindustries.com

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

For further information concerning this matter, please call:

Warren D O'Neill

270

210-5315

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 Street, Suite 810
Tallahassee, FL 32303

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

U.S. O'NEILL INDUSTRIES, 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 08/27/2009 and assigned
Florida document number L09000083108.

This amendment is submitted to amend the following:

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

O'Neill Cattle Company LLC

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)

8 E. QUINTETTE RD SUITE B

CANTONMENT, FL 32533

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8 E. QUINTETTE RD SUITE B

CANTONMENT, FL 32533

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:

Enter Florida street address

Florida

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.

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

[illegible]

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

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[illegible]

E. Effective date, if other than the date of filing: June 30, 2023 (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 June 26, 2023

Signature of a member or authorized representative of a member

Warren D. O'Neill

Typed or printed name of signee

Payment Receipt Confirmation

Your payment was successfully processed.

Transaction Summary

Description	Receipt Confirmation	
	Amount	
	\$538.75	
Total Amount Paid	\$538.75	

Customer Information

Customer Name	Warren ONeill	Receipt Date	6/22/2023
Local Reference ID	3979621563CC L09000083108	Receipt Time	04:32:46 PM EDT

Payment Information

Payment Type	Credit Card	Credit Card Number	*****5106
Credit Card Type	VISA	Order ID	51822952

Billing Information

Billing Address	P. O. Box 10938	Phone Number	8325381073
Billing City, State	Houston, TX	This receipt has been emailed to the address below.	
ZIP/Postal Code	77206	Email Address	lengelcke@usoneillindustries.com
Country	US		