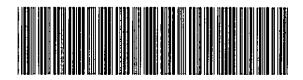
## N100000 44730

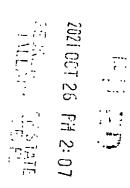
(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO: Registration Division of C			
SK Wyso	ng Equipment Sales LLC	_	•
SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Sherrie Wysong		
		Name of Person	<del></del>
	SK WYSONG EQUIPME	NT SALES LLC	
		Firm/Company	<del></del>
	1718 S Magnolia Avenue		
		Address	
	Sanford, FL. 32771		
	skwysong@gmail.com	City/State and Zip Code	
	, , ,	Name of Person  EQUIPMENT SALES LLC  Firm/Company is Avenue  Address  771  City/State and Zip Code iil.com  ail address: (to be used for future annual report notification) er, please call:  616	
For further information	n-man address: (		ameanon)
ror turther information Sherrie Wysong	i concerning this matter, please c		
Sherite Wysong			
Name	e of Person		me Telephone Number
Enclosed is a check for	r the following amount:		
■ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Add			
Registration	n Section Corporations	Registration S Division of Co	
P.O. Box 6	<del>-</del>	The Centre of	
Tallahassee			oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SK Wysong Equipment Sales LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 04/26/2010 OF STATE The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number \_\_\_\_\_L10000044730 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 "LI.C" 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) 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

## 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 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
MGR	Mark Wysong	1718 S Magnolia Avenue, Sanford, FL. 32771	
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			□ Change
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			□ Remove
			□ Change
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•	10/21/2021			
ective date, if other than the neffective date is listed, the date mute: If the date inserted in this becument's effective date on the E	date of filing:  st be specific and cannot be prior lock does not meet the applic	able statutory filing rec		
cord specifies a delayed effectives filed.	e date, but not an effective ti	me, at 12:01 a.m. on th	ne earlier of: (b) Th	e 90th day after the
October 21 ed	2021	<del></del> ·		
	Signature of a member or author	Lyson	- Diambar	
Sherrie Wysong, MGR	Signature of a member or authorized	orized representative of a	memoer	
<del> </del>	Tunad or print	ed name of signee		