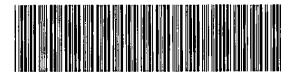
L10000118394

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dunings Entity No. 1)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
6/17/21 th

Office Use Only



300363985323

RECEIVED

MAY 1 0 2021

05/11/21--01004--024 *+25.00

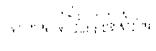
21 MAY 10 PR 3: 16

COVER LETTER

TO:		ation Sec 1 of Corp					
com de	Dru		orkplaces, USA, LLC				
SUBJEC	UI:	_=_	Name of Lim	ited Liability Company			
The encl	losed Art	icles of A	mendment and fee(s) are sub-	mitted for filing.			
Please re	cturn all o	correspon	dence concerning this matter	to the following:			
			Thomas H. Roche				
			<u> </u>	Name of Person			
			Drug Free Workplaces, US	A, LLC			
				Firm/Company	· · · · · · · · · · · · · · · · · · ·		
			4300 Bayou Blvd Suite 13				
				Address			
			Pensacola, FL 32503				
				City/State and Zip Code			
			thomas@drugfreeworkplace				
For furth	her infori	nation co	E-mail address: (neerning this matter, please ea	to be used for future annual r all:	eport notification)		
Thomas	Roche			850 382	-1029		
Name of Person			Person	Area Code	Daytime Telephone Number		
Enclosed	d is a che	ck for the	e following amount:				
☑ \$25	.00 Filin	g Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certificate of Status &		
Mailing Address: Registration Section				Street Address: Registration Section			
Division of Corporations				Divisior	of Corporations		
		ox 6327			itre of Tallahassee		
Tallahassee, FL 32314				2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF THE RESERVE WE **OF**



21 HAY 10 PA 3: 16

Drug Free Workplaces, USA, LLC					
(Name of the Limites	d Liability Compa A Florida Limited I	ny as it now appears on o	ur records.)		
The Articles of Organization for this Limited Lia Florida document number L10000118394 This amendment is submitted to amend the follow	·	were filed on 11/12/20	and assigned		
A. If amending name, enter the new name of		ility company here:			
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company." the designa	tion "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applica	ble:	4300 Bayou Blvd. Su	te 13		
(Principal office address MUST BE A STREET		Pensacola, FL 32503			
Enter new mailing address, if applicable:		PO Box 11096			
(Mailing address MAY BE A POST OFFICE BOX)		Pensacola, FL 32524			
B. If amending the registered agent and/or re agent and/or the new registered office address Name of New Registered Agent:			s, enter the name of the new registered		
Name of New Neglitered Agent.	4300 Bayou B!	oul Codes 12			
New Registered Office Address:	4500 Hayou Di	Enter Florida st	vet address		
	Pensacola		Florida 32503		
	-	Ciņ:	Zip Code		
New Registered Agent's Signature, if changing R	egistered Agent:				
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regist being filed to merely reflect a change in the re company has been notified in writing of this c	r and complete tered agent as _i egistered office	performance of my oprovided for in Chap	lutics, and I am familiar with and er 605, F.S. Or, if this document is		

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 21 HAY 10 PA 3: 16

<u>Title</u>	Name	Address	Type of Action
MGRM	Drug Free Workplace, Inc.	27 W Romana St.	□Add
		Pensacola, FL 32502	≘ Remove
			□ Change
MGRM	Drug Free Workplaces of America, LLC	4300 Bayou Blvd Suite 13	= Add
		Pensacola, FL 32503	Remove
			Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□ Add
			□Remove
			□Change

	information, en				2	1 MAY 10	門 3
				-			
					-		
-							
					<u>-</u> _		
			<u>-</u>				
		·					
		<u> </u>					
			-				
							
						 -	
•							
							
		· 			 -		
		May 5.	2021				
ective date, if other reffective date is listed, th	than the date of	f filing:	prior to date at tili	ng or more than 90	(optional days after tilin	l) g.) Pursuant to	605,0207
te: If the date inserted	in this block does	s not meet the ap	oplicable statuto	ry filing requirer	nents, this dat	e will not be	listed as
rument's effective date	on the Departme	nt of State's reco	ords.				
ecord specifies a delayers filed.	ed effective date, b	out not an effecti	ve time, at 12:0	La.m. on the ear	her of: (b) 1	he 90th day	after the
s med.		- /	7				
led May 5		2021					
led	5////		·				
	of the						
/ / ٧							
_//	Signatui	re of a member or	authorized repres	entative of a memb)cı		

Filing Fee: \$25.00