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amend/mame change

VEREMY AUSTIN 9043349587

Remitt Address: 5586 CR218 MAXVIIIc, FL 32234

> Hylefor orresponditions 19 NOV -4 AMII: 35

COVER LETTER

TO: Registration So Division of Co					
	CONTRACT HAULING, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	JEREMY AUSTIN				
		Name of Person			
		Firm/Company			
	5586 CR 218			19	
	JACKSONVILLE, FL 322	Address 34		9 HOV -4 MHTH: 35	
	AUSTINHAULING@GMA			3	15. 15.
		to be used for future annual report notifi	cation)	35	
For further information of	concerning this matter, please c	all:			· 75
JEREMY AUSTIN		904 334-9587 at ()			
Name (of Person	Area Code Daytime	Telephone Number	_	
Enclosed is a check for t	he 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 F Certificate of S Certified Copy (additional copy i	Status & 7	
MAIL	ING ADDRESS:	STREET/COURIE	CR ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AUSTIN CONTRACT HAULING			on our records.)
(Name of the Limit	ed Liability Compa (A Florida Limited L	ny as it now appears Liability Company)	
he Articles of Organization for this Limited L	iability Company	were filed on $\frac{1/10}{1}$	/2011 and assigned
lorida document number L11000003967			33 T
This amendment is submitted to amend the foll	owing:		जिन हिन् -
a. If amending name, enter the new name o	f the limited liab	ility company her	<u>e</u> :
AUSTIN HAULING, LLC			
he new name must be distinguishable and contain the v	vords "Limited Liabil	ity Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	5586 COUNTY R	RD 218
Principal office address MUST BE A STREE		JACKSONVILLE	3, FL 32234
Inter new mailing address, if applicable:		5586 COUNTY F	RD 218
Mailing address MAY BE A POST OFFICE BOX)		JACKSONVILLE	E, FL 32234
3. If amending the registered agent and egistered agent and/or the new registered o			our records, enter the name of the t
Name of New Registered Agent:	JEREMY AUS	TIN	
New Registered Office Address:	5586 COUNTY	RD 218	
		Enter Floria	la street address
	JACKSONVIL	LE	, Florida 32234
		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

Page 1 of 3

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
AMBR	JEREMY AUSTIN	5586 COUNTY RD 218 JACKSONVILLE, FL 32234	= Add
			Remove
			☐ Change
MGRM	KRISTINA AUSTIN	1619 MORROW RD CLAY HILL, FL 32234	
			■ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			Add
			Remove
			Change
			
			□ Remove
			Change
			Add
			☐ Remove
			Change

Effective date, if other than the date of filing:					
Effective date, if other than the date of filing:	•				
Effective date, if other than the date of filing:					
Effective date, if other than the date of filing:		<u> </u>			
Effective date, if other than the date of filing: [Coptional] Fan 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 605.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The erecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier. The 90th day after the record is filed. Dated 10/25/19 Adjunction of the date of filing: [Coptional] [Coptional					
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Signaphre of a member or authorized representative of a member	/ L.	77			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00