# LI3000049654

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## **COVER LETTER**

TO:		istration Sect sion of Corp			T.	
01.15 1.F	CT	Ad Value In	vestments, LLC			
SUBJECT:						
The en-	closed	Articles of A	mendment and fee(s) are subr	nitted for filing.		
Please	return	all correspon	dence concerning this matter t	to the following:		
			Douglas K. McKoy			
				Name of Person		
			Law Office of Douglas K. A	McKoy, P. A.		
				Firm/Company	·	
			302 - B North Main St.			
				Address		
			Trenton, FL 32693			
			doug@chicflandlegal.com	City/State and Zip Code		
			E-mail address: (t	o be used for future annual r	eport notification)	
For fur	ther in	formation co	ncerning this matter, please ca	dt:		
Dougla	as K. N	dcKoy		352 490	)-4488	
		Name of I	Person	Area Code	Daytime Teleph	ione Number
Enclos	ed is a	check-for the	following amount:			
	5.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

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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

Ad Value Investments, LLC

## (<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 4, 2013	_ and assigned
Florida document number L13000049654	

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 Liabilit	y 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)	
	H H
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	132 IS

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:	Douglas K. McKoy			
New Registered Office Address:	302 North Main Street - Suite B			
<u>,</u>		Enter Florida street address		
	Trenton	Florida <sup>32693</sup>		
	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

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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

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<u>Title</u>	Name	Address	Type of Action
MGRM	Anthony Messina	6409 SW 55th St., Trenton, FL 32693	_ 🗆 Add
			_ ERemove
			_ 🗆 Change
MGRM	Kimberly C. Herring	522 SE 897th St., Old Town, FL 32680	_ ■Add
			_ Remove
			Change
·			_ 🗆 Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary )

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	April			2021			
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