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(Re	equestor's Name)	
(Ad	ldress)	
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JUN 1 8 2019 S. YOUNG

FERRANTE & ASSOCIATES

ATTORNEYS AT LAW

126 Prospect Street - Cambridge, Massachusetts 02139 Telephone 617-868-5000 Fax 617-868-2519

May 30, 2019

<u>VIA FEDERAL EXPRESS</u>

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

Re: Advanced Fire Sprinklers, LLC; Doc# L13000087957
Articles of Amendment to Articles of Organization

Dear Sir or Madam,

On behalf of Advanced Fire Sprinklers, LLC, enclosed please find the following documents:

- 1. A Cover Letter;
- 2. A fully executed Articles of Amendment to Articles of Organization two (2) copies;
- 3. Check# 19248 in the amount of \$ 55.00 payable to the Florida Department of State, representing payment for the filing fee and a certified copy; and
- 4. A self-addressed stamped envelope to use for mailing the certified copy to our office.

Kindly arrange to file the above application.

If you have any questions or need additional information, you may contact me by e-mail at mo@ferranteandassociates.com or by telephone at (617) 868-5000 ext. 224.

Sincerely,

Marlene Orellana

Paralegal

Enclosures

Registration Section
Division of Corporations

TO:

COVER LETTER

SUBJECT:		RE SPRINKLERS,LLC	
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspo	ndence concerning this matter to	the following:	
	Ν	MARLENE ORELLANA	
	 	Name of Person	
	FEI	RRANTE & ASSOCIATE	ES
		Firm/Company	_
	1	26 PROSPECT STREET	
		Address	
	С	AMBRIDGE, MA 02139)
		City/State and Zip Code	
	E-mail address: (to	be used for future annual re	port notification)
For further information c	oncerning this matter, please cal	l:	
MARI	ENE ORELLANA	617	868-5000 EXT. 224
Name o	f Person	at () Area Code	Daytime Telephone Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

DocuSign Envelope ID: 9DDB897D-1F47-4E96-953A-52A6144B2991 ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

	RE SPRINKLERS, LLO		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears ted Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Comp Florida document numberL13000087957		06/18/2013	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company he	<u>re</u> :	
	N/A		
The new name must be distinguishable and contain the words "Limited I	iability Company," the de	esignation "LLC" or the	
Enter new principal offices address, if applicable:		N/A	<u> </u>
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		新五 <u>五</u>
(Frincipal Office was established Laborated)	<u> </u>		
		-	
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>		parties labor
B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent:	d office address on here:	our records, ente	r the name of the ne
New Registered Office Address:			
	Enter Florida street address		
	<u></u>	, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Ag	<u>ent:</u>		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	elete performance of as provided for in C	my duties, and I an Chapter 605, F.S. C	n familiar with and or, if this document is
		N/A	
If	Changing Registered Ag	ent, Signature of New	Registered Agent

DocuSign Envelope ID: 9DDB897D-1F47-4E96-953A-52A6144B2991 11 amenuing Authorized rerson(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>	<u>Address</u>	Type of Action
MGR	WYMAN JODY MATHIS	2450 SATELLITE BOULEVARD DULUTH, GA 30096	■ Add
			🗆 Remove
			Change
CFO	WYMAN JODY MATHIS	2450 SATELLITE BOULEVARD DULUTH, GA 30096	Add
			Remove
			🗖 Change
			Remove
			Change
			Add
			□ Remove
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			Remove
			Change
			Add
			Remove
			Change

	N/A
-	
Note: If the	te, if other than the date of filing:
the record s) The 90th	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of day after the record is filed.
	Docustaned by: Douglas G. Cooke
Dated	
Dated	DocuSigned by:

Page 3 of 3

Filing Fee: \$25.00