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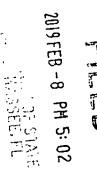
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C. GOLDEN FEB 1 4 2019

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: AM	rican Temite Name of Lim	and PUST Services ited Liability Company	LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	<u> </u>	Name of Person	
	American Terr	VITE and PUST SUMM	S.LIC
	3708 W. Into	rnational Speakay	RIVd.
	Dayton	Stach, Fr. 30104 City/State and Zip Code	
	E-mail address: (Anna (QCF) 1944 to be used for future annual report abtif	K, COM
For further information c	oncerning this matter, please ea	alt:	
ASNICY S	SQSS(.V f Person	at (<u>Z</u> 84) <u>427-3</u> Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2019 FEB -8 PM 5: 02 and assigned Florida document number 4130000925100 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 "LLC" or the abbreviation "LLC." 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:

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.

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

Title Type of Action Name Address Kerly Caudill 3708 W. International Souchayo Add BIVA. Doutona frach Pr □ Change 3708 W. International Speechageness Josey Caudill Hvd Dutona Hach fr 32124 ☐ Change \square Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove _□ Change

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ette <u>e:</u> [the date, if other than the date of filing:
ecc ne (ord specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier of 90th day after the record is filed.
ed _	January 29. 2019
	Signature of a member or authorized representative of a member
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