L13000/49843

(Requestor's Name)	_
(Address)	_
(Address)	
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PICK-UP WAIT MAIL	
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(Document Number)	
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05/21/18--01014--004 **25.00



COVER LETTER

TO: Registration Division of C		•	
VETUS	Enviornmental Services, LLC		
SUBJECT.	Enviornmental Services, LLC Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Jim Farah		
		Name of Person	
	Farah Law		
		Firm/Company	
	6550 St. Augustine Road, Suite 103		
		Address	· · · · · · · · · · · · · · · · · · ·
	Jacksonville, Florida 322		
	jim@farahlaw.com	City/State and Zip Code	18
		to be used for future annual report notifi	cation) V
For further information	concerning this matter, please c	all:	-
Jim Farah		904 443-0060 at ()	
Name	of Person	Area Code Dastime	Telephone Number
Enclosed is a check for	the 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mai	LING ADDRESS:	STREET/COURIE	TR ADDRESS:

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

STREET/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building 2051 Executive Center Circle Tallahassee, Fl. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VETUS Envrionmental Services, LLC		
(Name of the Limited Liabil (A Florid	ity Company as it now appears on our records.) a Limited Liability Company;	
The Articles of Organization for this Limited Liability (Company were filed on 13/22/2013	and assigned
Florida document number L13000148843	¹	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
Gate One 96, LLC		
The new name must be distinguishable and contain the words "Lir	nited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD.	RESS)	
		•
		3
Enter new mailing address, if applicable:		- ي
(Mailing address MAY BE A POST OFFICE BOX)		•
B. If amending the registered agent and/or registered agent and/or the new registered office ado		nter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florid	a
	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

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>	Name	Address	Type of Action
			□ Add
			☐ Remove
			☐ Change
			□ Remove
			☐ Change
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Fective date, if other than the date must be effective date is listed, the date must be: If the date inserted in this blockment's effective date on the Dep	ik does not meet the applicable si	(option of filing or more than 90 days after that ory filing requirements, this	nnI) iling.) Pursuant to 605.03 date will not be listed :
record specifies a delayed The 90th day after the reco	effective date, but not an end is filed.	ffective time, at 12:01 a.	m. on the earlier
June 19	2018		
	gradure of a member or authorized re	mesentative c 2 memers	
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Filing Fee: \$25.00