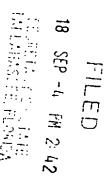
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COVER LETTER

SUBJECT:		'S TALKIN TRASH LLC	ited Liability Company	
		realize of this	ned Blasmiy Company	
The enclose	d Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		PATRICK MCDONOUGH		
		TWO GUYS TALKIN TRAS	Name of Person SH LLC	
		7025 N WICKHAM RÐ STE	Firm/Company E 110	
		MELBOURNE, FL 32940	Address	<u>. </u>
		PATRICKMCD13@GMAIL.C	City/State and Zip Code COM	
		E-mail address: (to be used for future annual report notif	ication)
For further i	nformation c	oncerning this matter, please ca	all:	
PATRICK I	MCDONOU	GН	321 514-3661	
	Name o	f Person	at () Area Code Daytime	: Telephone Number
Enclosed is	a check for th	ne following amount:		
■ \$25.00 H	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

Registration Section Division of Corporations

TO:

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

TWO GUYS TALKIN TRASH LL	С		
(Name of the Limit	ted Liability Comps (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Li Florida document number L14000025191	iability Company	were filed on 2/13/2014	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	SEP-11 PIL 2
The new name must be distinguishable and contain the w	vords "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation: الربي الماد the abbreviation:
Enter new principal offices address, if applic	able:	7025 N WICKHAM RD, STE 11	10
(Principal office address MUST BE A STREE		MELBOURNE, FL 32940	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	••		10
B. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:	ffice address her		enter the name of the new
	7025 N MACK	HAM RD, STE 110	
New Registered Office Address:	7025 IN VVICK	Frier Florida street 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.

City

MELBOURNE

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>	<u>Name</u> ANTHONY P CARRENDER	Address 3336 HOOFPRINT DR	Type of Action
AMBR	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□ Add
		MELBOURNE, FL 32940	
			■ Remove
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			Remove
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Effective date, if other than the If an effective date is listed, the date mu	st be specific and cannot b		g or more than 90 days a	
Note: If the date inserted in this b document's effective date on the D			filing requirements,	his date will not be listed a
ne record specifies a delaye The 90th day after the rec		ut not an effect	ive time, at 12:0:	La.m. on the earlier o
AUGUST 30	2018			
Aug.	7////	•		
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Typed or printed name of signee

Filing Fee: \$25.00