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N. CAUSSEAU

JUN 20 2017

## COVER LETTER

Registration Section  
Division of Corporations

SUBJECT: ADVANTAGE PROTECTION, LLC.

\_\_\_\_\_  
Name of Limited Liability Company

The (closed) Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LINDA FELIZOR

\_\_\_\_\_  
Name of Person

ADVANTAGE PROTECTION, LLC.

\_\_\_\_\_  
Firm/Company

1000 W MCNAB ROAD #254

\_\_\_\_\_  
Address

POMPANO BEACH, FL 33069

\_\_\_\_\_  
City/State and Zip Code

JAKARI2001@GMAIL.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RODNEY HOGGINS

954 512-3063  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$15.00 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**

ADVANTAGE PROTECTION, LLC.

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 10/20/2016 and assigned  
to file document number 114000026068.

This amendment is submitted to amend the following:

**1. If amending name, enter the new name of the limited liability company here:**

Any 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

**2. 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:

RONNIE HOGGINS

New Registered Office Address:

641 NW 16TH STREET

*Enter Florida street address*

POMPANO BEACH

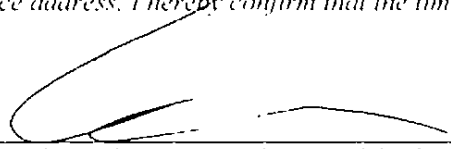
*City*

Florida 33060

*Zip Code*

**3. 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 understand 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

For ending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

OWNER = Owner/Manager

MEMBER = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
OWNER	RONNIE HOGGINS	641 NW 16TH STREET	<input checked="" type="checkbox"/> Add
		POMPANO BEACH, FL 33060	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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1. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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2. Effective date, if other than the date of filing: 6/10/2017 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
a) The 90th day after the record is filed.

Dated 6/10 2017

[Signature]  
Signature of a member or authorized representative of a member

RONNIE HOGGINS

Typed or printed name of signee