LIH 000064264

(Rec	questor's Name)	
(Add	dress)	<u></u>
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(City	//State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

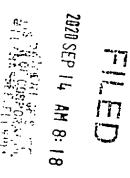
Office Use Only



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09/14/28--01024--002 **25.00

OCT 21 2020 S. YOUNG



Tallahassee, FL 32314

COVER LETTER

TO: Registration Se Division of Cor			
ACCCE LI	C		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Keith E. Crockett		
		Name of Person	
	Crockett Law P.L.		
		Firm/Company	<u>.</u>
	10033 Sawgrass Drive We	st, Suite 125	
		Address	
	Ponte Vedra Beach, FL 32	2082	
		City/State and Zip Code	
	keith@crockettlawpl.com		-
	E-mail address: (to be used for future annual report noti-	fication)
For further information of	concerning this matter, please c	ali:	
Keith E. Crockett		904 247-4831	
Name o	of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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)
Mailing Addre		Street Address:	-4:
Registration Division of 0		Registration Se Division of Cor	
P.O. Box 63		The Centre of T	-

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

company has been notified in writing of this change.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2

ACCCE LLC		120 S
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.)	1
(A France E	авину сопрану)	F
The Articles of Organization for this Limited Liability Company v	were filed on 04-18-2014	and assigned
Florida document numberL14000064264		The co
		-
This amendment is submitted to amend the following:		• •
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
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)		
training man care man 1 1925/11 COL COL 11 COL DOWN		
B. If amending the registered agent and/or registered office a	ddress 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:		
	Enter Florida street address	
	, Florid	la
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	ee to act in this capacity. I furthe	er 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

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

Title	Name	Address	Type of Action
AMBR	Christi W. Williams	4883 Castlegate Court	
		Jacksonville, FL 32256	≣Remove
			Change
			□ Add
			□ Remove
			Change
			□Add
			□Remove
			□Change
	, , , , , , , , , , , , , , , , , , ,		DAdd
			□Remove
			Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			ClChange

Effective date, if other than the date of filing: [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 Nate: If the date inserted in this block does not need the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Dated 9/9/2020 Dated Docudement by: Uniting to Williams Decessional Part of a member or authorized representative of a member		
Effective date, if other than the date of filing: (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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective dute, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Outed 9/9/2020 Uniti Williams		
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Christi W Williams		
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	Dated _	Christi W Williams

Filing Fee: \$25.00