L140000 73461

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TO:

Registration Section Division of Corporations

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

SUBJECT:	C & S SiGi	N SERVICE LLC		Tag.
ooneer.		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	PR-1
Please return	all correspo	ndence concerning this matter	to the following:	
			Name of Person	.
		5	Russell R. Winer FirmAftorney-at-Law 520 4th Street North Suite St Petersburg FL 3370	
		Address		
	rw@inherit-Florida.com	City/State and Zip Code		
			to be used for future annual report notif	ication)
For further in	nformation co	oncerning this matter, please ca	all:	
Russell Win	er		727 821-4000 at ()	
	Name of	f Person		: Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling 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)
	MAILI	ING ADDRESS:	STREET/COURI	ER ADDRESS:

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

C & S SIGN SERVICE LLC

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

The Articles of Organization for this Limited Lia	bility Company	were filed on	and assigned
Florida document number L14000073461	·		
This amendment is submitted to amend the follow	ving:		Ž.
A. If amending name, enter the new name of t	<u>he limited liabi</u>	lity company here:	
The new name must be distinguishable and contain the wor	rds "Limited Liabili	ty Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:	17406 Garden Heath Ct	
(Principal office address MUST BE A STREET	ADDRESS)	Land O' Lakes FL 34638	
		17100 0 1 11 1 0	
Enter new mailing address, if applicable:		17406 Garden Heath Ct	
(Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	Land O' Lakes FL 34638	
			
B. If amending the registered agent and/or registered agent and/or the new registered office agent and/or the new registered office agent. Name of New Registered Agent:		:	ls, enter the name of the new
New Registered Office Address:	17406 Garden F	leath Ct	
		Enter Florida street addre	255
	Land O' Lakes	, F	lorida 34638
		City	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:		·
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist-being filed to merely reflect a change in the recompany has been notified in writing of this change in the cha	and complete pered agent as pered agent as pered office dange.	performance of my duties, a rovided for in Chapter 605, address, I hereby confirm the ging Registered Agent, Signature	and I am familiar with and F.S. Or, if this document is that the limited liability

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>	Address	Type of Action
MGR	Jeremy Scoggins	17406 Garden Heath Ct Land O' Lakes FL 34638	B Add
			□ Remove
PROP CLEAVE SCOGGINS	CLEAVE SCOGGINS	remove this individual died 3/23/2019	
	-		■ Remove
			Change
PRES	Jeremy Scoggins	17406 Garden Heath Ct Land O' Lakes FL 34638	■ Add
			Remove
			Change
			Add
			□ Remove
			☐ Change
			
			Remove
			Change
			□ Add
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			Change

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(If an effect Note: 1	e date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 00th day after the record is filed.
Dated _	March 20 (2019)
	- had some some some some some some some some
	Signature of a member or authorized representative of a member
	Jeremy Scoggins, Manager
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00