

L14 00008185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

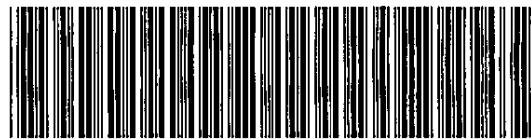
(Business Entity Name)

(Document Number)

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15 MAR -3 PM 12:39
FILED
J. Shores MAR 18 2015

J. Shores MAR 18 2015

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Steve Burkett's Well Service, LLC.
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Steve Burkett

Name of Person

Steve Burkett's Well Service, LLC.

Firm/Company

9601 Joan Rd.

Address

Youngstown, Florida 32466

City/State and Zip Code

burkettstevejoy@aol.com

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

For further information concerning this matter, please call:

Steve Burkett

Name of Person

at (850) 381-6319

Area Code

Daytime 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)

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

Steve Burkett's Well 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 Liability Company were filed on May 20, 2014 and assigned Florida document number 11400081895.

This amendment is submitted to amend the following:

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

Burkett's Professional Well Service, "L.L.C."

The new name must be distinguishable and end with the words "Limited 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 ADDRESS)

9601 Joan Road
Youngstown FL 33466

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15 MAR 77
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B. 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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated _____

Steve C Burkett
Signature of a member or authorized representative of a member

Steve C Burkett
Typed or printed name of signee

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Filing Fee: \$25.00

FLORIDA SECRETARY OF STATE
RECEIVED
15 MAR - 3 PM 12:30

FILED
15 MAR - 3 PM 12:30