L14000 122 672

(Re	questor's Name)	
(1/6	questors Marrier	
	ldress)	
(Ad	aress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
	_	
<u> </u>		
Special Instructions to	Filing Officer:	
		Į

Office Use Only



600334304916

09/16/13--01030--003 ★★60.00

THE SEP 16 AN II: 19

SEP 2 7 2019

COVER LETTER

	gistration Sec vision of Corp			
SUBJECT.	FLORIDA	DRIVERS ASSOCIATION, I.	LC	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please return	ı all correspoi	ndence concerning this matter	to the following:	
		Raymond G. Robison		
			Name of Person	
		Fox McCluskey Bush Rob	ison PLLC	
			Firm/Company	
		3461 SE Willoughby Blvd		
			Address	
		Stuart, F1, 34994		
			City/State and Zip Code	
		robison@foxmccluskey.com		
		E-mail address: (i	to be used for future annual report notifi-	cation)
For further in	nformation co	oncerning this matter, please ca		
Raymond G	. Robison		at () 287-4444 Area Code Daytime	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	a check for th	e following amount:		
□ \$25.00 F	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

FLORIDA DRIVERS ASSOCIATION, 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 Cor Florida document number <u>L14000122672</u>	mpany were filed on 8/5/201-	and assigned
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the limite	ed liability company here:	
ADSBB, LLC		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	
Enter new mailing address, if applicable:		通 第 二
(Mailing address MAY BE A POST OFFICE BOX)		
		The second second
B. If amending the registered agent and/or registered agent and/or the new registered office address.		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	and addrage
	City	, Florida
New Registered Agent's Signature, if changing Registered	•	·
I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and conaccept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nd agree to act in this capa mplete performance of my a ent as provided for in Chap	luties, and I am familiar with and ter 605, F.S. Or, if this document is
	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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			Change
			□ Remove
			Change
			Remove
			Change
			☐ Remove
			Change
			Remove
		·	Change
			Add
		<u></u>	□ Remove
			Change

_	
_	
<u>te:</u> If t	date, if other than the date of filing:
	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier th day after the record is filed.
ed	Scrtinic 10 2019
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00