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## **COVER LETTER**

Division of Corporations
SUBJECT: S.W. A.T. Property Services, 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:
Mike Wakeland Name of Person
Panie of Ferson
Firm/Company
4317 1st Ave Dr NW
Bradenton FL 34209  City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mike Wakeland at (941) 465-1273  Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$Certified Copy (additional copy is enclosed) \$\Bigcup \$60.00 Filing Fee, 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

S.W.A.T. Propert  (Name of the Limited Liability Compan (A Florida Limited L	y Services LLC  ny as it now appears on our records.)  iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on <u>F&amp;b</u> 23, 2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	- '	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abi	breviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	4317 1st Ave Dr Bradenton FL	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	4317 1st Ave Dr Bradenton FL	- NW 34209
B. If amending the registered agent and/or registered office address here		the name of the new
Name of New Registered Agent:		- <del>1</del>
New Registered Office Address:	Enter Florida street address	F 12 12 12 12 12 12 12 12 12 12 12 12 12
<del></del>	, Florida	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

MGR = Manager AMBR = Authorized Member			
<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Chris Kelly	706 46th St E Bradenton FL 3420	Add
		Bradenton FL 3420	<u>δ</u> □ Remove
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ive date, if other than the date of filing: 1/4/2016 extive date is listed, the date must be specific and cannot be prior to date of filing or mor If the date inserted in this block does not meet the applicable statutory filing ent's effective date on the Department of State's records.	requirements, this date will not be li
ecord specifies a delayed effective date, but not an effective tir e 90th day after the record is filed.	ne, at 12:01 a.m. on the earl
Signature of a member or authorized representative o	
Signature of a member or authorized representative of	

Page 3 of 3

Filing Fee: \$25.00