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COVER LETTER

TO: Registrati Division o	i Section Corporations	
SUBJECT: N	24thew J. Becker LLC	
SUBJECT:	Name of Limited Liability Company	
The analogad Artic	of Amandment and for(a) are submitted for filing	
	of Amendment and fee(s) are submitted for filing. spondence concerning this matter to the following:	
	o o	
	Matthan J. Beckar.	
	Name of Person	
	Matthew J. Becker LLC Firm/Company	
	5553 Mulat Rd	
	Address	
	Milton F2 321583	
	City/State and Zip Code City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	i i
For further informa	E-mail address: (to be used for future annual report notification) on concerning this matter, please call:	
Mattha		, r
N	at (601) 662 549 at Code Daytime Telephone Number	
	or the following amount:	
\$25.00 Filing F	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

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

Matthew J. Reck (Name of the Limited Liability Comp.	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 15005350	2 75 15
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	SSS Myld+ Rd Milton F23253
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5553 Mulat Rd Milton F 30583
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address: 5353	Enter Florida street address
MIH	Florida 3
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 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 = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
VP_	Drew Juseph. Bayer	6933 Javid Rd	Add
			⊠ Remove
	Chy address o	en STS3 Mulat Rd Milton FL3DSE3	Change
nyr	Matthew J. Bouk	er SSS3 Mulat Rd	🗆 Add
		M11tu FZ30563	Remove
			Change
			□ Remove
			☐ Change
			Remo@
			G Change
			
			□ Add
			☐ Change
			□ Remove
			Change

D: If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Remove Drew Brulen 25
ν.ρ.
Chy mailing address on
all to Mothrawa Boller
10 5555 11WA Rd

22
7
<u></u>
E. Effective date, if other than the date of filing:
If 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 record is filed.
Dated 13-20-18
Signature of a member or authorized representative of a member
Motthew Beller Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00