L15000126121

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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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Special Instructions to	Filing Officer:	
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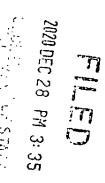
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COVER LETTER

TO: Registration Se Division of Cor					
Installer Di	rect LLC				
SUBJECT:	Name of Limi	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Michael Urch				
		Name of Person			
	Installer Direct LLC				
	· · · · · · · · · · · · · · · · · · ·	Firm/Company			
	7805 43rd Ave. Dr. W			202	
		Address		2020 DEC	
	Bradenton, Fl 34209		. .	.C 28	- C-E-C
		City/State and Zip Code	.		
	mdurch@gmail.com		ري. ناري	PH 3:	
	E-mail address: (to be used for future annual report no	ification)	ည္	
For further information of	oncerning this matter, please ca	ali:		٠.	
Michael Urch		941 807-1561 at ()			
Name o	f Person		ne Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filin Certificate Certified C	of Status & opy	
Mailino Addred	Re:	Street Address:			
DIVISIO	ration Section	ations			
P.O. B Tallah	10× 6327	32314			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Installer Direct LW		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our rectability Company)	:ords.)
he Articles of Organization for this Limited Liability Company	were filed on <u>07/20/2015</u>	and assigned
Norida document number L15000126121		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
Michael Dowdian Publishing LLC		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "l	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7805 43rd Ave. Dr. W	207
Principal office address MUST BE A STREET ADDRESS)	Bradenton, Fl 34209	9 7
		N
Enter new mailing address, if applicable:		A P
Mailing address MAY BE A POST OFFICE BOX)		ार्च स
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3. If amending the registered agent and/or registered office a	address on our records, <u>en</u>	ter the name of the new regis
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	dress
	,	, 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 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
			□Add
			□Remove
			☐ Change
			□ Add
			□Remove
			
			Add CO D Remove
			Remove
		.	□ Remove
			□Change
			□ Add
			□Remove
			☐ Change
			□Add
			□Remove
			□ Change

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) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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. Signature of a member or authorized representative of a member Michael Urch Typed or printed name of signee

Filing Fee: \$25.00