Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name: MCLIN & BURNSED P.A.

Account Number: 104657003604 Phone: (352)753-4690 Fax Number: (352)751-4993

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: <u>CarlieS @ mainburnsed.com</u>

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LHD SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

JUL 22 **2019** 

M. SOLOMON

## ARTICLES OF AMENDMENT-TO ARTICLES OF ORGANIZATION OF

LHD Services, LLC			
(Name of the Limite	d Clability Compan A Florida Limited L	ny as it now appears on our records. iability Company)	ا.
he Articles of Organization for this Limited Li- lorida document number L15000146363			and assigned
his amendment is submitted to amend the follo	wing:		
. If amending name, enter the new name of	the limited liabi	ility company here:	
VA			11.6"
A new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the designation "LLC"	or the approximation Line.
Enter new principal offices address, if applicable:		N/A	<u></u>
Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	ROX)	N/A	000 p
Mailing address MAT BE A COST OFFICE	<u> </u>		
B. If amending the registered agent and registered agent and/or the new registered of	Vor registered of	office address on our record re:	s, enter the name of the
Name of New Registered Agent:	Lucius H. Daniel, Jr.		
	208 Sunrise L	ane	
New Registered Office Address:	200 5011112		100
New Registered Office Address:	200 3011120 2	Enter Florida street addre	ass lorida 32726

## 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 = Authorized Member

Title	Name	<u>Address</u>	Type of Action
	Harvey K. Daniel	550 Cemetery Road	
MGR			Add
		Mount Dora, FL 32757	
			■ Remove
			<b></b>
			Change
AMBR	Harvey K. Daniel	550 Cemetery Road	<b>5</b> • 43
			□ Add
		Mount Dora, FL 32757	■ Remove
			- Kellinac
			☐ Change
		550 Cemerary Road	
AMBR	Amanda G. Inman		□ Add
		Mount Dora, FL 32757	
		, , , , , , , , , , , , , , , , , , ,	Remove
			Change
	Lucius H. Daniel, Jr.	208 Sunrise Lane	
MGR			Add
		Eustis, FL 32726	
			□ Remove
			☐ Change
MGR	Denise L. Daniel	550 Cemetery Road	
			<b>=</b> Add
		Mount Dora, FL 32757	= -
			□ Remove
			☐ Change
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			Remove Co
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Page 3 of 3

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