L15000208603

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	1
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COVER LETTER

TO: Registration of Division of	on Section Corporations		
SUBJECT:	Miller Undergo	rond 'LLC' mited Liability Company	
The enclosed Article	es of Amendment and fee(s) are sub	bmitted for filing.	
Please return all corr	respondence concerning this matter	r to the following:	
	BRYA	AN MILLEIZ Name of Person	
		r Underground Firm/Company	'LLC"
	602	33rd St W	
	BRADENT	TON FL, 34205 City/State and Zip Code	
	<u>brunis 8</u> E-mail address: (1857 D gmail. Com (to be used for future annual report notif	ication)
For further informati	on concerning this matter, please c		
BRYAN Na	MILLER me of Person	at (941) 565 - Area Code Daytime	0487 Telephone Number
Enclosed is a check t	for the following amount:		
	e \$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**

(Name of the Limited Liab	no erg no	as it now appear	LC'rs on our records.	<u> </u>
The Articles of Organization for this Limited Liability Florida document number <u>L 15000208 603</u>				
This amendment is submitted to amend the following:	:			
A. If amending name, <u>enter the new name of the li</u>	imited liabili	ty company h	ere:	
The new name must be distinguishable and contain the words "L	Limited Liability	Company," the	designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADI	DRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad		ce address o	n our records,	enter the name of the nev
Name of New Registered Agent:				
New Registered Office Address:		Enter Flo	rida street address	,
			, Flor	ida
		City	,	Zip Code
New Registered Agent's Signature, if changing Registe	ered 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 amfamiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or of 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

Page 1 of 3

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
MGR	BRYAN MILLER	602 33 rd St W, Bradenton Fl	34205
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			□ Change
			🗆 Add
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an effective date is l	listed, the date must b	be specific and o	cannot be prior to o	late of filing or mor	e than 90 days	after fil	ing.) Pur	suant to 605
	nserted in this bloc ve date on the Dep			statutory ming	requirements	s, unis a	ate will	not be list
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The 90th day	-16/ Feb /		//		f a member		JIS FEB I	MACHINETTA .
The 90th day			//	ed representative o	f a member	AHISSEE F		Al and Allenda

Page 3 of 3

Filing Fee: \$25.00