## LIMM37481

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
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FILED 2016 FEB 29 A IO: 25 SECRETARY OF STATE

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## **COVER LETTER**

TO: Registration S Division of Co				
	xplorer Services,LLC			
OCCUPATION OF THE OCCUPATION O	Name of Lim	ited Liability Company	<del></del>	
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Peggy J Rodriguez			
		Name of Person		
		Firm/Company		
	5101 S.W. 60 St. Rd. #707			
		Address		
	Ocala,Fl 34474		<del></del>	
	rodriguez1414@centurylink			
For further information	E-mail address: ( concerning this matter, please co	to be used for future annual report notifi	cation)	
Peggy Rodriguez		352 682-0289	2018 7ALU	
Name	of Person	Area Code Daytime	Number AHASSE Telephone Number AHASSE	<u> </u>
Enclosed is a check for	the following amount:		3133 1333 134 135 135 135 135 135 135 135 135 135 135	$\overline{\square}$
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee.  Certificate of Status &  Certified Copy  (additional copy is enclosed)	ס

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

Diligent Explorer Services		
(Name of the Limited Liability Compa (A Florida Limited I	<b>ny as it now appears on ou</b> Liability Company)	r records.)
The Articles of Organization for this Limited Liability Company	were filed on $\frac{2/23/16}{}$	and assigned
Florida document number L16000037681		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		EB 29
	<del></del>	SS 29
Enter new mailing address, if applicable:		
* **	<del></del>	
Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
	* <del>************************************</del>	<u> </u>
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our 1 e:	records, enter the name of the ne
Name of New Registered Agent:	<del></del>	
New Registered Office Address:		
	Enter Florida stree	et address
		, 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 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 premoved from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
P	Peggy Rodriguez	5101 SW 60 St.Rd. #707	🗖 Add
		Ocala,Fl 34474	□ Remove
			☐ Change
	<del></del>	<del></del>	
			Remove
			□ Change
	<del></del>		☐ Add
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If amending any other	r information, enter change(s) here: (Attach additional sheets, if necessary.)
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<del></del>	
(If an effective date is listed, t Note: If the date inserted	than the date of filing:
he record specifies a The 90th day after	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier or the record is filed.
Peb.25	2016
	Signature of a thember of authorized representative of a member
Peggy J Rodr	riguez
<del></del>	Typed or printed name of signee

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Filing Fee: \$25.00