10/27/2016

Division of Corporations



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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STRATEGIC ENVIRONMENTAL AND FACILITY LLC

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SECARITARY OF STATE

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D. BRUCE NOV 01 2016 TO:

Registration Section

COVER LETTER

Division of Corporations				
STRATEG	GIC ENVIRONMENTAL A	ND FACILITY LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Cheyenne Moseley			
		Name of Person		
	Legalzoom.com, Inc.			
		Firm/Company		
	101 N. Brand Blvd., 110	h Floor		
		Address	······································	
	Glendale, CA 91203			
		City/State and Zip Code	TAL	
	cboyd@strategicleas.com	to be used for future unnual report not	Tresion 5	
For further information c	oncerning this matter, please c	·	Incention) AHASS	
	, , , , , , , , , , , , , , , , , , ,		0724 View 19724	
Cheyenne Moseley		at (
Name o	f Person	Area Code Daytim	to Telephone Number	
			E 025	
Enclosed is a check for the	ne following amount:		S. S.	
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)	
84 4 11	ING ADBURGO.	STREET/COUR	TED ADDRESS.	
Registr	ING ADDRESS: ration Section	Registration Section	on	
	n of Corporations ox 6327	Division of Corpo Clifton Building	rations	
Tallahe	issee, FL 32314	2661 Executive Co Tallahussee, FL 32		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STRATEGIC ENVIRONMENTAL AND FACILITY LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 08/01/2016 and assigned Florida document number L16000143101 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

. Florida

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Charles C. Boyd	1715 NW 114th Loop, Bldg 2	Ø Add
		Ocala, FL 34475	□ Remove
AMBR	CHARLES C BOYD	1715 NW 114TH LOOP, BLDG. 2	
		OCALA, FL 34475	Ø Remove
AMBR	JERRID M NEAL	1715 NW 114TH LOOP, BLDG. 2	
		OCALA, FL 34475	€ Mentove
		LAHAS	
AMBR	Mikhail Bagdasaro	1715 NW 114th Loop, Bldg 2	Sp XX
		Ocola, FL 34475	n_□ Remove
		0	30
			□ Add
			D Remove
			_ 🗆 Add
			Remove
			_

If amending any other information, enter change(s) here: (Attach additi	ional sheets, if necessary.)
	
Effective date if other than the date of filing.	(antional)
Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of receipt or filed date and cannot the date this document is filed by the Florida Department of State)	(optional) be more than 90 days after
Dated October 4 2016.	
Signatule of a Mamber of authorized representative	e of a member
Charles C. Boyd Typed or printed name of signee	

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Filing Fee: \$25.00

STORETARY OF STATE