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(Re	equestor's Name)	
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(Ad	ldress)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
		
☐ PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
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	ocument Number)	•
(DC	cument Number)	•
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
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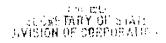
TO: Registration S Division of C		Y 🔭 🥳 🤻 🕫 🕫	u-
	utions, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Michael J. Prohidney, Esq		
		Name of Person	
	Tilden & Prohidney, PL		
		Firm/Company	
	431 12th Street West, Suite	e 204	
		Address	
	Bradenton, FL 34205		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	fication)
For further information	concerning this matter, please c	all:	
Michael J. Prohidney		941 243-3959 at ()	
Name	e of Person		e Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	☐ \$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

TO ARTICLES OF ORGANIZATION OF



ENVI SOLUTIONS, LLC

2016 OCT -6 AM 9: 32

-	City	, Florida Zip Code
	Enter Florida stre	
New Registered Office Address:		
Name of New Registered Agent:		
B. If amending the registered agent and/or registered agent and/or the new registered office		records, <u>enter the name of the ne</u>
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
Enter new mailing address, if applicable:		
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new principal offices address, if applicable	le:	
The new name must be distinguishable and contain the word	Is "Limited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
A. If amending name, enter the new name of th	ne limited liability company here:	
This amendment is submitted to amend the following	ing:	
Florida document number <u>L16000</u>	87211	
The Articles of Organization for this Limited Liab		and assigned
(A	Florida Limited Liability Company)	

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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR Scott R. Bocklund	Scott R. Bocklund	7820 64th Street	
		Pine Springs, MN 55115	□ Remove
			☐ Change
AMBR	Mitchell Wang	313 Labeux Ave.	■ Add
		Hanover, MN 55341	□ Remove
			☐ Change
			Add
			☐ Remove
			Change
		-	D Add
			Remove
			□ Change
			Add
		 	□ Remove
			☐ Change
<u> </u>		·	Add
			☐ Remove
			☐ Change

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E. Effectiv	date, if other than the date of filing: (optional)
Note: 1	ive 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 (the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as tt's effective date on the Department of State's records.
If the reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 0th day after the record is filed.
Dated _	(0)4 . 2016
	Signature of a member or authorized representative of a member Tom (ARTWRSGH)

Page 3 of 3

Filing Fee: \$25.00