LIL 000 195198

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AAD - CHEM LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Angel Perez Vellafanes Name of Person
AAD-CHEM LLC Firm/Company
8637 Leighton Drive
City/State and Zip Code a. Vellafanes @ quikset pro. com E-mail address: (to be used for a ture annual report notification)
E-mail address: (to be used for fature annual report notification)
For further information concerning this matter, please call:
Angel Vella Fances at (813) 810 - 0059 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Secretificate of Status Secretified Copy (additional copy is enclosed) \$25.00 Filing Fee Secretified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (cadditional 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**

AAD-CHEM L	LC
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records. Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 10/21/16 and assigned
Florida document number 116 000 195 198.	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8637 Leighton Drive
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FL 33614
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8637 Leighton Drive Tampa, FL 33614
B. If amending the registered agent and/or registered oregistered agent and/or the new registered office address her	
Name of New Registered Agent: Ange	Vellafares = =
New Registered Office Address: 8637	Leighton Drive ST & Francisco ST & ST
Tam	Pa FL Florida 3344
New Registered Agent's Signature, if changing Registered Agent:	City Sip Code

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 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

Type of Action Title <u>Address</u> <u>Name</u> Angl Vellafares Change Daryl Stringer ☐ Change ☐ Change □ Add □ Remove _□ Change _□ Add ☐ Remove ☐ Change _ Add ☐ Remove ☐ Change

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Page 3 of 3

Filing Fee: \$25.00