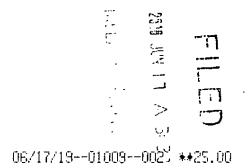
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TALLAHASSEE FORDING

D SCOTT
JUN 1 7 2019

COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: M	Kes Tick O Name of Limi	ted Liability Company		-
	Amendment and fee(s) are subtendence concerning this matter			
	Mike B Mike's 3677 Tallaha	Name of Person Tile ICC Firm/Company Houston Address See Fl 35 City/State and Zip Code		TILED
For further information c	E-mail address: (oncerning this matter, please ca	to be used for future annual report notifi all:	cation)	
		at () Area Code Daytime	Telephone Number	
Name o	f Person	Area Code Daytime	Letephone Number	
Enclosed is a check for the	he 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)	
MAIL	ING ADDRESS:	STREET/COURI	ER ADDRESS:	

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 3/3/17 and assigned Florida document number L170000 46735 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address MUST BE A STREET ADDRESS) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address Enter Florida street address Enter Florida street address Thereby 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 affice address. I hereby confirm that the limited liability	(Name of the Limited Liability Con (A Florida Limited	npany as it now appe ed Liability Company	ears on our records	<u>s.</u>)		
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If Changing Registered Agent, Signature of New Registered Agent

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** <u>Address</u> Title Name | 6158 Huckelberry Ln. MGR John Starton ☐ Remove ☐ Change Remove Change □ Add ☐ Remove _□ Change _□ Add □ Remove _□ Change _□ Add ☐ Remove _D Change

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