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COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT: M, C	CHAEL E. Name of Lim	WEST LL ited Liability Company	<u>C</u>		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	MICHREL	E, WEST Name of Person			
		Firm/Company			
	663 INL	OUSTR.AL Address	DR.		
	TAHAHASS	City/State and Zip Code E 5 7 5 C 4 1 P 7 O to be used for future annual report notific	310 A B GM	ALL.C	OM
For further information c	E-mail address: (oncerning this matter, please ca		ration)		
Name o	of Person	at ()	Telephone Number	- F201	
		7.1.1.2 SSA.1 SA.7.11110		2019 HAY 3 	APP Eppe
Enclosed is a check for the	he following amount:			<u> </u>	
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate o Certified Co (additional copy	f Status & 🚞	0 44.0

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

M, CHAEL E. WEST SCUIPTOR 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 L	iability Company	were filed on (08/14/	17 and assig	ned
Florida document number <u>L17000</u>	17248	2			
This amendment is submitted to amend the following	_				
A. If amending name, enter the new name o	f the limited liab	oility company h	ere:		
The new name must be distinguishable and contain the w	vords "Limited Liabi				
Enter new principal offices address, if applic	:able:	663	INDUS	TRAIL	DR
(Principal office address MUST BE A STREE	<u>T ADDRESS)</u>	TAILA	INDUS HASSEL	E, F1	
			3310	2019 NAY	 T
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			<u> </u>	
D 10 2 4 5 1		GC			
B. If amending the registered agent and registered agent and/or the new registered or			i our recorus, <u>en</u>		
Name of New Registered Agent:					
New Registered Office Address:	663	INDU 9 Enter Flo	TRAIL rida street address	DR.	
			E, Florida		0
New Registered Agent's Signature, if changing	Registered Agent	:		-4	

If Changing Registered Agent, Signature of New 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MICHAEL E.W	FST 663 INDUSTRAIL D	7.4 _□ Add
		TALLA HASSEE, FL	☐ Remove
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		_
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or mo	(optional) ore than 90 days after filing.) Pursuant to 6	05.0207
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be li	isted as
account of the control of the contro		
he record specifies a delayed effective date, but not an effective ti	me, at 12:01 a.m. on the ear	lier o
The 90th day after the record is filed.		
- Mar 3/ 2019		
Dated MAY 31 . 2019.		
Michael E, Glast Signature of a member or authorized representative		
Signature of a member or authorized representative	of a member	
•		

Page 3 of 3

Filing Fee: \$25.00