LIACCO IEPC54

(Requestor's Name)	
(Address)	
	Address)	
(City/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name	e)
(Document Number)	
Certified Copies	Certificate	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Solvision of Col			
SUBJECT: FLORIDA	ROLL OFF SOLUTIONS, LI	.c	
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Daniel M. Coton		
		Name of Person	
	TRINKLE REDMAN PA		
	- -	Firm/Company	
	121 NORTH COLLINS S	TREET	
	121 NORTH COBERTS	Address	
	PLANT CITY 33566		
		City/State and Zip Code	
	djones@trinkle-law.com		
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report noti all:	fication)
Donna Jones		at (813) 752-6133	
Name of Person Area Code Daytime Telephone Number		c Telephone Number	
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration Section		Registration Section Division of Corporations	
Division of Corporations P.O. Box 6327		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA ROLI. OFF SOLUTIONS LLC			
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears or Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Company	y were filed on NOVE	EMBER 6 2017	_ and assigned
Florida document number L17000229054			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company here:		
MC SPARKMAN ENTERPRISES LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the desig	nation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:			<u> </u>
Principal office address MUST BE A STREET ADDRESS)			* . 1
	<u></u>	···	n n
		<u>.</u> N	
Enter new mailing address, if applicable:	_	3.5 65.5	ω ·
Mailing address MAY BE A POST OFFICE BOX)		m_{co}	2 1.1
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3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our reco	rds, <u>enter the name (</u>	of the new regis
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	street address	
		, Florida	
	City		Zip Code

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

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>	Name	Address	Type of Action
			□Add
			□Remove
			Change
	 		□Add
			□Remove
		• 1.	□Change
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tive date, if other than the date of filing:	(optional) rc than 90 days after filing.)) Pursuai	nt to 605.(
If the date inserted in this block does not meet the applicable statutory filing			
ment's effective date on the Department of State's records.			
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. or	n the earlier of: (b) The	e 90th c	lav after
filed.		,,,,,,,,	arie.
September 17			
Marie			
1 7/4/	f a member		