K17CCC 255474

(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	

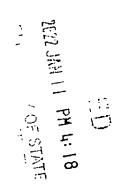
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A. RIVERS
JAN 2 4 2022



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COVER LETTER

	on Section f Corporations
	P360 LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Artic	es of Amendment and fee(s) are submitted for filing.
	Tespondence concerning this matter to the following:
	Fielding, Dickey H. V
	Name of Person
	FSPD, LLC
	Firm/Company
	839 Mississippi Ave
	Address
	Lakeland, FL 33801
	City/State and Zip Code
	dmpayne29@gmail.com
	E-mail address: (to be used for future annual report notification)
For further informa	tion concerning this matter, please call:
Fielding, Dickey	863 712-1695 at (
1	art () ame of Person Area Code Daytime Telephone Number
Enclosed is a chec	for the following amount:
≅ \$25.00 Filing	Tee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
_	ion Section Registration Section
Divisior P.O. Bo	of Corporations Division of Corporations 6327 The Centre of Tallahassee
	see, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COMP360, LLC					
(Name of the Limit	ed Liability Compa (A Florida Limited l	ny as it now appears on our r Liability Company)	ecords,)		
The Articles of Organization for this Limited Li Florida document number L17000258974	ability Company	were filed on 12/20/2017		and assigned	
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
FSPD. LLC					
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the designation	"LLC" or the abbrevi	ation "L.L.C."	_
Enter new principal offices address, if applications	able:	170 FITZGERALD RD 2			
(Principal office address MUST_BE A STREET ADDRESS)		LAKELAND FL 33813			_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office a	170 FITZGERALD RD 2 LAKELAND FL 33813 address on our records, e		the new regis	 stered
Name of New Registered Agent:	Fielding H Dicl	key V			
New Registered Office Address: 170 Fitzger		RD 2		-	_
New Negistered Office / Idaless.	•	Enter Florida street a	oddress	7/2	_ - []
	Lakeland		_, Florida <u>33813</u> 	OF PH	J
		City	- <u>- z</u>	ip Code)	_
New Registered Agent's Signature, if changing F	Registered Agent:			可可	,
I hereby accept the appointment as registere provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as p registered office	performance of my dutie provided for in Chapter (I further agree t es, and I am fami 605, F.S. Or, if th	to comply with liar with and iis document i	h the

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
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			□Change
			□ Remove
			□Change
			□Add
			Remove
			□Change
			
			Remove
			Change
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ffective date, if other than the date an effective date is listed, the date must be ote: If the date inserted in this block becament's effective date on the Department.	e specific and cannot be prick does not meet the appl	icable statutory filing r	(optional) e than 90 days after filing.) Pure	suant to 605.020 not be listed a
record specifies a delayed effective d is filed.	ate, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The 90t	th day after th
January 4	. 2022	·		
	A 1.	1/20:1	1/	
	Fislding gnature of a member or aut	TO DICKEY	/	

Filing Fee: \$25.00