118000018518

(Requestor's N	lame)
(Address)	
(Address)	
(City/State/Zip.	/Phone #)
PICK-UP WA	AIT MAIL
(Business Enti	ity Name)
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Certified Copies Certi	ificates of Status
Special Instructions to Filing Office	er;
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 1, 2020

BRIAN LEENKNECHT ROYAL BLUE SECURITY SOLUTIONS "LLC" 1713 WOODHAVEN DR BRANDON, FL 33510

SUBJECT: ROYAL BLUE SECURITY SOLUTIONS "LLC"

Ref. Number: L18000018518

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 420A00010756

COVER LETTER

TO:

Tallahassee, FL 32314

	Registration Division of (Section Corporations		-	
SUBJEC	Royal B	lue Security Solutions LLC			
SUBJEC	-1: <u></u>	Name of Lim	ited Liability Company		
The enclo	osed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Pl e ase re	turn all corre	spondence concerning this matter	to the following:		
		Brian Leenknecht			
			Name of Person		
		Royal Blue Security Solut	urity Solutions LLC Name of Limited Liability Company endment and fee(s) are submitted for filing. nee concerning this matter to the following: Brian Leenknecht Name of Person Royal Blue Security Solutions Firm/Company 1713 Woodhaven Dr Address Brandon FL, 33510 City/State and Zip Code rrian@royalbluesecurity.com E-mail address: (to be used for future annual report notification) erring this matter, please call: at (
			Firm/Company		
		1713 Woodhaven Dr			
			Address		
		Brandon FL, 33510			
			City/State and Zip Code		
		•			
		E-mail address: (to be used for future annual report not	lification)	
For furth	er informatio	n concerning this matter, please of	all:		
Brian Le	enknecht				
	Nan	ne of Person	Area Code Daytin	me Telephone Number	
Enclosed	l is a check fo	or the following amount:			
□ \$ 25.	00 Filing Fee	_	Certified Copy	Certificate of Status & Certified Copy	
	Mailing Add				
	Registratio	n Section f Corporations	-		
	P.O. Box 6		The Centre of	•	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited (A	Liability Compa Florida Limited	ny as it now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited Liab Florida document number L 18000018518	oility Company	were filed on February 1st.	2018 and assigned
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	ne limited liab	ility company here:	
he new name must be distinguishable and contain the word	ls "Limited Liabi	lity Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	1713 Woodhaven Dr.	
Principal office address MUST BE A STREET.	ADDRESS)	Brandon FL, 33510	2020
			.020 JUI
Enter new mailing address, if applicable:		1713 Woodhaven Dr.	8
Mailing address MAY BE A POST OFFICE BO	<u>2X)</u>	Brandon FL, 33510	# 19
-			
B. If amending the registered agent and/or registered affice address been and/or the new registered office address been amended and Name of New Registered Agent:	here:		ter the name of the new regist
New Registered Office Address:	1713 Woodhav	en Dr. Enter Florida street ad	literer
	Brandon		
		City	. Florida 33510 Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Royal Blue Security Solutions "LEC"

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

Title	<u>Name</u>	Address	Type of Action
AR	Sandra M Case	4103 Cragmont Dr.	□ Add
		Tampa FL, 33610	■Remove
			☐ Change
AMBR	Jason Hershberger	1713 Woodhaven DR.	
		Brandon FL, 33150	□ Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□ Remove
		 	
			□Add
			□ Remove
			□Change
			□Add
			□ Remove
			□Change

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 more than 90 days after filing.) Pursuant to 605.020 Moles: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the red is filed. Dated May 4th 2020 Signature of a member of authorized representative of a member Brian Leenknecht			
Effective date, if other than the date of filing:			
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Blue Jewent Signature of a member or authorized representative of a member	ord is filed.		
Blue Jewent Signature of a member or authorized representative of a member	May 4th	2020	
	Dated		
	R11 4		
	101EM H	Signature of a member or authorized representative of a member	 _
		Typed or printed name of signee	

Filing Fee: \$25.00