## L15000027116

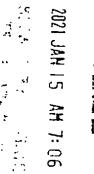
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Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7
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## **COVER LETTER**

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Registration Section
Division of Corporations

TO:

Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Meghan Edwards  Name of Person  Edwards & Edwards PA  Firm/Company  6620 Southpoint Dr S, Suite 200  Address  Jacksonville, FL 32216  City/State and Zip Code
Please return all correspondence concerning this matter to the following:  Meghan Edwards  Name of Person  Edwards & Edwards PA  Firm/Company  6620 Southpoint Dr S, Suite 200  Address  Jacksonville, FL 32216  City/State and Zip Code
Meghan Edwards  Name of Person  Edwards & Edwards PA  Firm/Company  6620 Southpoint Dr S, Suite 200  Address  Jacksonville, FL 32216  City/State and Zip Code
Name of Person  Edwards & Edwards PA  Firm/Company  6620 Southpoint Dr S, Suite 200  Address  Jacksonville, FL 32216  City/State and Zip Code
Edwards & Edwards PA  Firm/Company  6620 Southpoint Dr S, Suite 200  Address  Jacksonville, FL 32216  City/State and Zip Code
Firm/Company  6620 Southpoint Dr S, Suite 200  Address  Jacksonville, FL 32216  City/State and Zip Code
Address  Jacksonville, FL 32216  City/State and Zip Code
Jacksonville, FL 32216  City/State and Zip Code
Jacksonville, FL 32216  City/State and Zip Code
City/State and Zip Code
jill@pefferle.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jill Pefferle 916 768-0228 at ()
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
■ \$25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee & Certificate of Status  Certified Copy (additional copy is enclosed)
Mailing Address:  Registration Section  Street Address:  Registration Section
Division of Corporations  Division of Corporations  Division of Corporations
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ED OF

2021 JAN 15 AM 7: 06

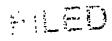
PKOS 6, LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Compa	any were filed on Janua	гу 30, 2018	and assigned
Florida document number L18000027116			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited l	iability company here	<b>;</b>	
DRILL HOLDINGS EAST, LLC			
The new name must be distinguishable and contain the words "Limited L	iability Company," the design	gnation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable:		,	
(Principal office address MUST BE A STREET ADDRESS	2		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
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B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:  Name of New Registered Agent:	ce address on our reco	ords, <u>enter the name</u>	e of the new registered
New Registered Office Address:	Enter Florida	street address	<del></del>
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compl accept the obligations of my position as registered agent being filed to merely reflect a change in the registered off company has been notified in writing of this change.	ete performance of my as provided for in Cha	y duties, and I am fa apter 605, F.S. Or, i	amiliar with and if this document is
ĪfČ	Changing Registered Agent	, Signature of New Reg	istered 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>	<u>Name</u>	Address 21 JAN 15 AM 1: UD	Type of Action
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an effective date is listed, the lote: If the date inserted in	an the date of filing: Je date must be specific and cannot this block does not meet the the Department of State's	ot be prior to date of t ne applicable statu	tiling or more th			ling.) Pursuan	
record specifies a delayed l is filed.	effective date, but not an ef	fective time, at 12	:01 a.m. on th	e earlie	er of: (b)	The 90th de	ay after the
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Filing Fee: \$25.00