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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

	Registration Se Division of Cor			
SHRIFE		ess Systems, LLC		
SURJEC	1.	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		William L. Wells		
			Name of Person	 _
		FB8 Business Systems, LI	.C	
			Firm/Company	
		4611 4th Ave Dr E		
			Address	. .
		Bradenton, FL34208		
		billwells13@gmail.com	City/State and Zip Code	
		E-mail address; (to be used for future annual report no	otification)
For furthe	er information c	oncerning this matter, please ca	all:	
William	L Wells		813 884-0414	
	Name o	of Person	at () Area Code Dayti	me Telephone Number
Enclosed	is a check for the	he following amount:		
■ \$25. 0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

FBSA Business Systems, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Comp.	pany were filed on February 1,2018	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
inter new principal offices address, if applicable:	<u> </u>	TO E T
<u>Principal office address MUST BE A STREET ADDRES.</u>	<u> </u>	3 m
Inter new mailing address, if applicable:		# 3: 08 FLOSON
Mailing address MAY BE A POST OFFICE BOX)		" "
 If amending the registered agent and/or registere egistered agent and/or the new registered office address 		er the name of the
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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	JAMES C. PRINCE	4611 4th Ave Dr E., Bradenton, FL.	■ Add
			Remove
			☐ Change
			Add
			□ Remove
			Change
			Endd T
			Repayee
			A Channer
			Add
			Remove
			Change
			□ Remove
			☐ Change
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			□ Remove
			☐ Change

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					JUL 30 PL
					3. 08 10. TE
					
	e date must be specif in this block does	fic and cannot be prior not meet the applica		more than 90 days afte	tional) er tiling.) Pursuant to 605.02 sis date will not be listed
record consistes a			t an effective	time, at 12:01	a.m. on the earlier
The 90th day after July 24		2018			
The 90th day after July 24	lian	- 2018	- Dell	5	
The 90th day after	llan Signature	2018	Old representative	ce of a member	

Page 3 of 3

Filing Fee: \$25.00