## 11800033879

(Requ	uestor's Name)	<del></del>
(Addr	ess)	
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(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Docu	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer;	

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## **COVER LETTER**

Registration Section

TO:

Division of Cor	porations			
SUBJECT:	FISH Dry W	a L.L.C.		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondence	ondence concerning this matter	to the following:		
	Jereny S	Name of Person	<del></del>	
	J Fish	Drywall LL Firm/Company	<u> </u>	
	8376 To	Address		
	Navarre, F	City/State and Zip Code	6	>
	J	to be used for future annual report notif	ication)	Ĵ
For further information c	oncerning this matter, please ca	all:		
Jeremy S Name o	Fish f Person	at ( <u>850</u> ) <u>496</u> Area Code Daytimo	- 1832 Telephone Number	
Enclosed is a check for the	_		_	
\$25.00 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 enclose	
Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cere	n ations	
		Tallahassee, FL 32,		

## TO ARTICLES OF ORGANIZATION OF

J. Florida Limited Liability Company as it now app  (A Florida Limited Liability Company)		<del></del>
The Articles of Organization for this Limited Liability Company were filed on	02/06/20/	and assigned
Florida document number <u>L 18000033879</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the words "Limited Liability Company," the	e designation "I.I.C" or the abbrev	viation "L.1.,C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		CA. 27 - 104
	;	
		55
Enter new mailing address, if applicable:	1.	
(Mailing address MAY BE A POST OFFICE BOX)		S S
(Manny data ess Mix DE 11 1 001 01 1 1 02 DON)		J
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:  Name of New Registered Agent:	on our records, <u>enter the</u>	name of the new
New Registered Office Address:	lorida street address	

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.

Ciry

If Changing Registered Agent, Signature of New Registered Agent

MGR = M $AMBR = A$	fanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00