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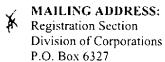
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COVER LETTER

	Registration Se Division of Cor			
CHD IE	Blake Syste		·	
SUBJEC	CT:		ited Liability Company	·
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Daniel S. Friebis		
		Friebis & Associates	Name of Person	
		3890 Turtle Creek Drive -	Firm/Company Suite B	
		Port Orange, FL. 32127	Address	
		dan.friebis@kyrstin.net	City/State and Zip Code	· <u>····</u> ·
		E-mail address: (to be used for future annual report notifi	ication)
For furth	er information c	oncerning this matter, please ca	all:	
Daniel S	. Friebis		386 492-7915 at ()	
	Name o	f Person		Telephone Number
Enclosed	l is a check for th	ne 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)



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blake Systems, LLC				
(Name of the Limited (A	Liability Comp. Florida Limited	any as it now appears on our r Liability Company)	ecords.)	
he Articles of Organization for this Limited Liab	ility Company	were filed on March 29, 2	018	_ and assigned
lorida document number L18000080549				
his amendment is submitted to amend the follow	ing:			
. If amending name, enter the new name of th	ie limited lial	oility company here:		
e new name must be distinguishable and contain the word	ls "Limited Liab	ility Company," the designation	"LLC" or the abbre	
nter new principal offices address, if applicab	le:		<u> </u>	2019
Principal office address MUST BE A STREET .	ADDRESS)			
			<u>.</u>	ယ်
nter new mailing address, if applicable:		3128 Woodside Drive	<u>.</u>	5: A
Mailing address MAY BE A POST OFFICE BO	<u> </u>	Ardmore, OK 73401	;	ည်
. If amending the registered agent and/or egistered agent and/or the new registered offic			cords, enter th	e name of th
Name of New Registered Agent:	Daniel S. Frieb	ois		
New Registered Office Address:	3890 Turtle Cr	eek Drive - Suite B	·	
		Enter Florida street e	ıddress	
	Port Orange		_, Florida ³²¹²⁷	!
		City		Zip Code

If Changing Registered Agent, Signature of New 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 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>	<u>Address</u>	Type of Action
MGR	Jorie J Harris	3128 Woodside Drive	
		Ardmore, OK 73401	= Add
			Remove
			Add
			□ Remove
			Change
			Add
			□ Remove
		.	Change
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Effective dute if ather	4646. 4.46	C 1		, ,,	•.
Effective date, if other If an effective date is listed, t	tnan the date of he date must be speci	fic and cannot be pr	ior to date of filing or	(opti more than 90 days after	onal) filing.) Pursuant to 605.0207
Note: If the date inserted document's effective date	I in this block does	not meet the app	licable statutory fil	ing requirements, thi	s date will not be listed as
document 5 enective date	on the Departmen	it of state s recor	us.		
ne record specifies a The 90th day after	delayed effect the record is f	ive date, but r iled.	not an effective	time, at 12:01 a	a.m. on the earlier of
Dated September 24		2019			
V .	X 211	7/1-		ve of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00