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## **COVER LETTER**

Division of Co	rporations		
suвјест: МСД	EOD BUILDE Name of Lim	RS 11C ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Serry	Alan Wickeoc Name of Person	<u></u>
	WCLEO	BUILDERS, Firm/Company	LLC_
	_ 3760 N	1W US HWY 41 Address	
	Jenning	3 S. FL 32053 City/State and Zip Code	
	Mcle collo ( E-mail address: (i	to be used for future annual report notifi	ail.com
For further information of	concerning this matter, please co	all:	
<u>Jerra</u>	A. Wicked	at ( <u>35810)</u> <u>623</u> Area Code Daytime	7-9653 Telephone Number
Enclosed is a check for t	he following amount:		
\$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 enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

MCL200 BUIL (Name of the Limited Liability Co (A Florida Lin	ompany as it now appears on on ited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Comp.	pany were filed on $\frac{A\rho}{}$	117,2018 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designa	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u>,</u>
(Principal office address MUST BE A STREET ADDRES.	<u></u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SECRETARY OF STAINS OF CORPORA
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	vant addrace
	Euce Florida Si	
	City	, Florida 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Dalton Alan McLead	3760 NW US HWY41	<b>)X</b> (Add
•		3760 NW US HWY41 Jennings, FL 32053	Remove
			Change
			□ Add
			Remove
			□ Add
			□ Remove
			_□ Change
			_□ Add
			_□ Remove
			_□ Change
			_□ Add
			_□ Remove
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Maraget- Jerry H. McLood	en A. McLead - 1070
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ective date, if other than the date of filing:	(optional) filing or more than 90 days after filing.) Pursuant to 605 story filing requirements, this date will not be lister
ord specifies a delayed effective date, but not an eff 90th day after the record is filed.	ective time, at 12:01 a.m. on the earlie
	M Lead esentative of a member

Page 3 of 3

Filing Fee: \$25.00