L18000 109 132

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basiless Elikly Name)
(Document Number)
Certified Copies Certificates of Status
<u></u>
Special Instructions to Filing Officer:

Office Use Only



000341219470

FILING CANCELLED
DUE TO RETURNED CHECK

03/04/20--01011--004 **25.00



Amend

COVER LETTER

TO: Registration Se Division of Cor		,		
	sections and Environmental Ser	vices LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	FILING CANCELLED	
Please return all correspo	ondence concerning this matter	to the following:	DUE TO RETURNED CHECK	
	Bill Havre			
		Name of Person		
	Registered Agents Inc.			
		Firm/Company		
	7901 4th St N			
		Address		
	St. Petersburg, FL 33702			
		City/State and Zip Code		
	agent@floridaregisteredage	nt.com to be used for future annua	d report notification)	
For further information of	concerning this matter, please c		· ·	
Bill Havre			75-1161	
Name o	of Person	at () Area Code	Daytime Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is er	Certificate of Status &	
<u>Mailing Addre</u> Registration Division of C	Section Corporations	Regist Divisio	Address: ration Section on of Corporations	
P.O. Box 632	27	The Co	entre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ny as it now appears on o Liability Company)	our records.)	
were filed on <u>5/5/201</u> .	8	and assigned
ility company here:		
ity Company," the designa	ation "LLC" or the	abbreviation "L.L.C."
- Marine		
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		020 H3.7
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		<u>~</u>
address on our recor	ds, <u>enter the n</u>	ame of the new register
		
Enter P (orida si	reet address	
Cin	, Florida	Zip Code
Ciù.		zap come
performance of my a	duties, and La oter 605, F.S. (
	ility company 5/5/201 Were filed on 5/5/201 ility company here: ity Company," the design ddress on our recor Enter Florida st City	ility company here: ity Company," the designation "LLC" or the designation "LLC" or the designation and dress on our records, enter the new least street address for the designation and dress for the designation and

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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
		<u> </u>	[]Add
			□Remove
			□Change
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			Remove
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			□Change
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			□Add
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			[]Change
			□Add
			□Remove
			□Change

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_	
Reason: Per IRS rule this subsidi	iary was not previously required to have its own EIN and therefore the EIN of the
parent company (47-3983757) ha	ad been used. However, the subsidiary is now required to have its own EIN.
The EIN for the subsidiary has be	een secured and therefore this amendment is being prompted.
etive date, if other than the date effective date is listed, the date must be of the date inserted in this block ment's effective date on the Depar	specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 does not meet the applicable statutory filing requirements, this date will not be listed
ord specifies a delayed effective da filed.	ate, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after to
d	. 2020
Bill Havre	

Filing Fee: \$25.00