L18000 136672

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COVER LETTER

	gistration Section vision of Corporations	
SUBJECT	Ian Wills Services, LLC Name of Limited Liability Company	
The enclose	d Articles of Amendment and fee(s) are submitted for filing.	
Please retur	n all correspondence concerning this matter to the following:	
	Herbert Willis	
	Name of reason	
	Firm/Company	
	2538 Jays Nest Lane	
	Holiday FL 34691 City/State and Zip Code_	
	hwill's @ sunshine signing connection. con E-mail address: (to be used for future annual report notification))
For further	information concerning this matter, please call:	
He	Name of Person at (727) 560 -6584 Area Code Daytime Telephone Number	
Enclosed is	a check for the following amount:	
E \$25.00	Filing Fee Solution Solution Status Solution Sol	

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

lan willis	Services LLC	
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny a <u>s it now appears on dur records.</u>) Jability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\underline{L}18000130672$.	were filed on <u>Ce/i/18</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		-8 ART
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the name of the new
Name of New Registered Agent:		
New Registered Office Address:	r Di si di	
	Enter Florida street address	
	, Florida	2: 0.1
	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
mar	Herbert Willis	2538 Jay Nest LM, Hollday, FL	<u>3</u> 46Î [†] Ŀ F∧dd
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in effective	ate, if other tha date is listed, the de date inserted in	ate must be spo	ecific and	cannot be p	rior to date	of filing or	more than s	0 days after	filing.) Pursu	ant to 605	.020 ed ac
	effective date on								2		
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Filing Fee: \$25.00