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

	gistration Sec vision of Corp			
SUBJECT:	MillCro LLC	;		
	. =	Name of Limi	ted Liability Company	
The enclosed	d Articles of A	Amendment and fee(s) are subt	nitted for filing.	
Please return	n all correspor	ndence concerning this matter t	to the following:	
		Lon Worth Crow IV		
			Name of Person	
		Lon Worth Crow IV PA		
			Firm/Company	
		211 North Commerce Av	renue	
			Address	<del></del>
		Sebring, Florida 33870		
			City/State and Zip Code	
		lonworthcrow@gmail.com		· · ·
			o be used for future annual report notific	cation)
For further i	nformation co	oncerning this matter, please ca	ıll:	
Lon Worth	Crow IV		863 382-2374	
	Name of	Person	at () Area Code Daytime '	Felephone Number
Enclosed is	a check for th	e following amount:		
\$25.00 1	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:

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

MillCro LLC		
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	<del></del>
he Articles of Organization for this Limited Liability (	Company were filed on June 11, 2018	and assigned
lorida document number L18000144127		
nis amendment is submitted to amend the following:		
If amending name, enter the new name of the lin	nited liability company here:	
ne new name must be distinguishable and contain the words "Lir	nited Liability Company," the designation "LLC" or th	e abbreviation L.L.G.
	Samuel	
nter new principal offices address, if applicable:		<u> </u>
rincipal office address MUST BE A STREET ADD	RESS)	<u> </u>
		<u> </u>
		ਰ ਨੂੰ
nter new mailing address, if applicable:		: : : : :
Aailing address MAY BE A POST OFFICE BOX)	-	
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. If amending the registered agent and/or regi	stered office address on our records, en	ter the name of the
gistered agent and/or the new registered office add		ter the simile of the
Name of New Registered Agent:		
New Registered Office Address:		
non regimered office redución.	Enter Florida street address	
	, Florida	
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
Manager	Chris Miller	3625 Valerie Blvd.	<b>⊋</b> Add
		Sebring, Florida 33870	□ Remove
			Change
Manager	Lon Worth Crow IV	211 North Commerce Avenue	■ Add
		Sebring, Florida 33870	☐ Remove
			□ Change
			Add
			□ Remove
			☐ Change
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reffective date	if other than the is listed, the date mus	be specific and	l cannot be prior			than 90 days		
reffective date te: If the date	if other than the is listed, the date mus e inserted in this bl- ctive date on the D	be specific and ock does not n	I cannot be prior neet the applic	able statute		than 90 days	after filing.) Pu	
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