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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: C Klein Stall LUC  Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:
Charles Klein  Name of Person  CKIEIN INSTALL LLCE  Firm/Company  4944 George Ave  Sarasota FL 34233  City/State and Zip Code  941-302-3314 info@casc. Me-  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  CWALLS KUID  at 941, 302-3314
Enclosed is a check for the following amount:    Second Se

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

C Klein	Install LL	<u> </u>
( <u>Name of the Limited Liability Cor</u> (A Florida Limit	mpany as it now appears on our record led Liability Company)	<u>ls.</u> )
The Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for Organization for the Organization for t	any were filed on $O(\delta)$	1/18 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
NIA	· ·	
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	NA NA	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	NA	02 51 02 51
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		s, enter the name of the nev
Name of New Registered Agent:	NA	
New Registered Office Address:		
	Enter Florida street addres	XX
	, F1	orida
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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	Name	Address	Type of Action
AMBR	Orlen Marfield JR	2808 NW Forest Tower Rd.	
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fan effective date is li Note: If the date in:	ther than the dat sted, the date must be s serted in this block e date on the Depar	specific and co does not me	et the applic	cable statuto	q ing or more ory filing r	than 90 days a	<b>ptional)</b> fler filing.) P this date wi	ursuant to ill not be	605.020 listed a:
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Dated TUN	e 12th		2019	<u>1</u> .	/				
	Sign	nature of a me	mber or aut	horized repres	sentative o	`a member			_

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Filing Fee: \$25.00