LIBOUIS6696

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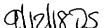


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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

Inone. 050 550 1500	
ACCOUNT NO. : 12000000195	
REFERENCE : 382154 7124010	
AUTHORIZATION: Spelle to a	
COST LIMIT : \$ 25/.00	
ORDER DATE : September 11, 2018 ORDER TIME : 3:07 PM	
ORDER NO. : 382154-005	·: ¯
CUSTOMER NO: 7124010	
DOMESTIC AMENDMENT FILING	
NAME: FLYING GRAY BISON LLC	FG.
EFFECTIVE DATE:	
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	

EXAMINER'S INITIALS:

CONTACT PERSON: Roxanne Turner -- EXT# 62969

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLYING GRAY BISON LLC				
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)			
The Articles of Organization for this Limited Liability Con Florida document number L18000156698	mpany were filed on JUNE 27, 2018	and assigned		
This amendment is submitted to amend the following:	-*			
A. If amending name, <u>enter the new name of the limite</u>	ed liability company here:			
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the	he abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	angangan			
Principal office address MUST BE A STREET ADDRE	ESS)			
_				
Enter new mailing address, if applicable:				
(Muiling address MAY BE A POST OFFICE BOX)	·			
 If amending the registered agent and/or registe egistered agent and/or the new registered office addre 		ter the name of the		
Name of New Registered Agent:				
New Registered Office Address:				
•	Enter Florida street address			
	, Florida	Zip Code		
	City			

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>	<u>Address</u>	Type of Action
MGR	WILLIAM P. DALY	8934 Olde Hickory Avenue	
		Sarasota, FL 34238	
			□ Change
MGR	ELIZABETH D. BRULPORT	45 Noble Road	
		Rochester, MA 02770	■ Remove
			Change
MGR	WILLIAM P. DALY, JR.	12 Carter Road	
		Foxborough, MA 02719	■ Remove
			Change
			Remove
			□ Change
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affective date, if of	her than the date of	filing:		(optional)	
fan effective date is lis	ther than the date of ted, the date must be specified in this block does	fic and cannot be prior to	o date of filing or more	than 90 days after filing.) F	ursuant to 605,020
	date on the Departmen		ore statutory many re	quirements, this date w	iii iiojene usted a:
e record specific	es a delayed effecti	ive date, but not	an effective time	e, at 12:01 a.m. or	n the earlier o
The 90th day a	fter the record is fi	iled.			
6	/	2010			
September	6	2018	_•		
	9 1				
			ized representative of a		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00