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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Links's Locksmith Services LLC 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:
Jesse Link
Name of Person
Firm/Company
903 Candlebark Dr.
Jacksonville, FL 32225 City/State and Zip Code links locksmith Services @ Gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tesse Link at (904) 860 - 6567 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
1 \$25.00 Filing Fee

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**

Links's Locksmith Servi	ces LLC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L 1800 0 189 287</u> .	were filed on $8/07/2018$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
Link's Locksmith Services 1	_LC
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	903 Cardlebark Dr. 25 00
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, FL 32225 Mg TI
Enter new mailing address, if applicable:	903 Cardlebark Dr. 3 30055 CD
(Mailing address MAY BE A POST OFFICE BOX)	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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Make Jesse Link, Owner of Link's Locksmith Services LLC. 200 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	-M	ake_	Jesse	Link	, Owner	of	Links	Locks	mith
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Filing Fee: \$25.00