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COVER LETTER

Tallahassee, FL 32314

TO: Registration Section Division of Corporations
SUBJECT: CLFARFIELD HOLDINGS LLC Name of Limited Liability Company
Name of Elimited Elability Conquery
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
VAMSI KRISHNA BODDU Name of Person
Clearfield Holdings LLC. Firm/Company
13128 SW 44th Street Address
Miramar, FL, 33027 City/State and Zip Code
Vamsikris.b@gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VAMSI KRISHNA BODDU at (989) 400 - 0068 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee, Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>CLEARFIELD HOLDING</u>	SLLC
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
	020 TA
The Articles of Organization for this Limited Liability Company	were filed on 10/25/2018 The arter assigned
Florida document number <u>L18000250918</u> .	>
This amendment is submitted to amend the following:	Sign P
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	· · · · · · · · · · · · · · · · · · ·
Enter new principal offices address, if applicable:	13128 SW 44th Street
(Principal office address MUST BE A STREET ADDRESS)	Miramar, Fl 33027
Enter new mailing address, if applicable:	13128 SW 44th Street
(Mailing address MAY BE A POST OFFICE BOX)	Miramar, Fl 33027
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
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 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
VP	ERIKA C HINTON	18564	
		18564 Sw 55" St, 33029	FL Remove
<u>VP</u>	VIJAY KUMAR BODDU	Dublin, or 7058 Blakemore Jane, 43016	
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ective date, if other than the date of filing effective date is listed, the date must be specific and te: If the date inserted in this block does not mument's effective date on the Department of S	cannot be prior to neet the applical	date of filing or m	ore than 90 days afl	ter filing.) Pur	suant to o	605.020 listed a
cord specifies a delayed effective date, but not s filed.	an effective tim	ie, at 12:01 a.m.	on the earlier of:	(b) The 90	th day a	fter the
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ed 01/11/2020.						
Signature of a n						