## L18000257753

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S. YOUNG

## **COVER LETTER**

	ision of Cor				
enn mær.	Trusley Co	mpany Limited	. · · · · · · · · · · · · · · · · · · ·	·	
SUBJECT		Name of Lin	nited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub-	omitted for filing.		
		ondence concerning this matter	-		
		Kenneth L. Trusley H			
			Name of Person		
			Firm/Company		
		1550 Lake Marian Road			
			Address		
		Kenansville/FL 34739			
			City/State and Zip Code		
		h.trusley.vet@gmail.com	to be used for future annual r	enort notification)	
For further is	aformation c	oncerning this matter, please ca		c <sub>i</sub> ,,	
Heather Trus				-5707	
	Name o	f Person	Area Code	Daytime Telephone Number	
Enclosed is a	check for th	ne following amount:			
<b>☆</b> \$25.00 F	filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate osed) Certified C	of Status &
	lling Addres		<u>Street Ad</u> Registra	dress: tion Section	
		orporations	~	of Corporations	

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Trusley Company Limited		
(Name of the Limited Liabi	lity Company as it now appears on our records Limited Liability Company)	rds.)
		2021
The Articles of Organization for this Limited Liability	Company were filed on 11/02/2018	and assigned
Florida document number L18000257753		
This amendment is submitted to amend the following:		and assigned
A. If amending name, enter the new name of the lin	nited liability company here:	6:
The new name must be distinguishable and contain the words "Lit	nited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del> </del>	·
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>ente</u>	er the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	ess
	Į.	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
AMBR	Heather Trusley	1550 Lake Marian Road	<b>=</b> Add
		Kenansville, FL 34739	□ Remove
			□Change
	<del></del> -		□Add
			□Remove
			□Change
			□Add
			□Remove
		<u> </u>	□Change
			□Add
			□Remove
			□Change
		<del></del>	□Add
		<u></u>	□Remove
			☐ Change
<del>.</del>			□Add
			□Remove
			C) c)

	<del></del>
<del></del>	
	optional)
Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days  Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	after filing.) Pursuant to 605,0207 (
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of is filed.	of: (b) The 90th day after the
Dated 2021	
Signature of a member of authorized representative of a member	

Filing Fee: \$25.00