## L18000264316

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(Cit	y/State/Zip/Phone #)		
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S. PRATHER

## **COVER LETTER**

Division of Corpor	rations			
SUBJECT: US	ter and ?	DEK LLC		
•	Name of Limite	ed Liability Company		
The enclosed Articles of Am	nendment and fee(s) are subm	itted for filing.		
Di	4.1	the Callagrian		
Please return all corresponde	ence concerning this matter to	the following.		
	Bobby	H. Danzey;	Jr.	
Firm/Company				
	18 Gruin	evere Lane 1	unit A	
18 Gruinevere Lane unit A				
	Crawford	ville FL. 35	1327	
	1	City/State and Zip Code	~~	
Crawford ville FL. 32327  City/State and Zip Code  1 i Sadan 2ey@ msn. com  E-mail address: (to be used for future annual report notification)				
	E-mail address: (to	be used for future annual report notification	on)	
For further information conc	cerning this matter, please call	l:		
Bobby H. I Name of Pe	MZEY, Jr.	at 850 50 Daytime Tel	ephone Number	
Enclosed is a check for the f	ollowing amount:			
夕 \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

**Registration Section** 

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

(Name of the Limited Liability Co	ompany as it now appears on our relited Liability Company)	FIL POP 21
The Articles of Organization for this Limited Liability Comp Florida document number <u>L180006431</u> &	pany were filed on	5   18 Find assigned
This amendment is submitted to amend the following:		当時に
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u></u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street a	ddress
		_, 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> Address Type of Action **Name** □ Add MGR BEDDAYH. DONZEYJr. ☐ Remove Change \_ Add □ Remove ☐ Change □ Add ☐ Remove Change □ Add ☐ Remove □ Change \_ 🗆 Add □ Remove \_□ Change

D. If amei	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.	)
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(If an effe <u>Note:</u> I	ve date, if other than the date of filing:	Pursuant to 605.0207 (3) will not be listed as the
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. o 90th day after the record is filed.	on the earlier of:
Dated _	Nev. 215+ , 2018.	, <b>~</b> 2
	Signature of a member or authorized representative of a member	NON BILLY
	Bobby H. Danzey Jr. Typed or printed name of signee	ARY ARY ASSE
	- Typed of prince imane of signice	AHIO: 07
	Page 3 of 3	7년 01

Filing Fee: \$25.00