L18000287110

equestor's Name)	
ddress)	
ddress)	
ity/State/Zip/Phone	e #)
☐ WAIT	MAIL
usiness Entity Nan	ne)
(Document Number)	
Certificates	of Status
Filing Officer:	
	WAIT Wainess Entity Nan

Office Use Only



400328249024

04/25/19~-01012--023 **25.00

MAY 0 8 2019 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corpora			
SUBJECT:	Mark Sh Name of Limi	ett Crigation U ited Liability Company	Ĺ
The enclosed Articles of Ame	ndment and fee(s) are subt	mitted for filing.	
Please return all corresponder	ce concerning this matter	to the following:	
-	Maxi	Name of Person	
-	Mar	- Shut brigation	ll
-	1044	9 127th fre Address	
-	(arg	City/State and Zip Code	
_	MarkShee E-mail address: (t	tir O guail, com	tification)
For further information conce	raing this matter, please ca	ıll:	
MAKS	hert	at (<u>727</u>) <u>409</u> Area Code Dayti	4228
Name of Pers	OH.	Area Code Dayti	me Telephone Number
Enclosed is a check for the fol	lowing amount:		
文 S25.00 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:

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 Compan	ts (rygesti: UC	_ _
(A Florida Limited L	lability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on 12/14/2018	and assigned
Florida document number <u>U8008287118</u> .		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the	abbreyiation \(\pi\)L.C.\(\text{"}\)
Enter new principal offices address, if applicable:	10449 DOTTH AH	
(Principal office address MUST BE A STREET ADDRESS)	Largo F1 33773	F by
	·	<u> </u>
Enter new mailing address, if applicable:		ين ۽
Mailing address MAY BE A POST OFFICE BOX)		¥ C
B. If amending the registered agent and/or registered off		r the name of the nev
registered agent and/or the new registered office address here	:	
	1001	
Name of New Registered Agent:	ark R Sheets Jr	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address: 0446	Enter Florida street address	_
ريم	روی, Florida	33773
	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
			☐ Remove
			□ Change
			□ Remove
			Change
			□ Add
		☐ Remove	
			☐ Change
	1912		
			□ Remove
			Change
			□ Remove
			□ Change
			Add
			□ Remove
			☐ Change

•	Address Charge: 13449 127th Are
	Hodres Charge: 10449 127th Ave Largo FL 33773
	
	-
	
	·
Note: If the	ate, if other than the date of filing:
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: a day after the record is filed.
Dated	Kpi:123 2019
	Signature of a member or authorized representative of a member
	Mak Sheets Jr Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00