L19000019716

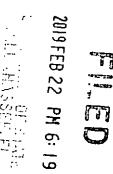
(Req	uestor's Name)	
(Add	ress)	
(riuu	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bus	iness Entity Na	me)
(Doc	ument Number)
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



100324968861

02/22/19--01015--008 **55.00



C. GOLDEN FEB 2 7 2019

COVER LETTER

Div	ision of Corp	orations		
SUBJECT:	SUNCOAST	INVESTIGATIONS & SEC	URITY, LLC	
SOBJECT.		Name of Limi	ited Liability Company	
The enclosed	d Articles of A	smendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		Randy D. Boyd		
			Name of Person	
			Firm/Company	
		411 Myakka Road		
			Address	
		Sarasota, FL 34240		
		spdrandy01@gmail.com	City/State and Zip Code	
		E-mail address: (t	to be used for future annual report notific	cation)
For further in	nformation co	ncerning this matter, please ca	all:	
Randy D Bo			941 322-2474 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	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

FII.ED 2019 FEB 22 PM 6:19

SONCOVEL INVESTIGATIONS & 2		$\Omega = 0$
(Name of the Limited I	Jability Company as it now appears on our records.) Florida Limited Liability Company)	THAT WASES, FI
The Articles of Organization for this Limited Liabi Florida document number £19000019716	lity Company were filed on January 17, 2019	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
BOYD INVESTIGATIVE GROUP, LLC		
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
-	, Florid:	a Zip Code
	CHY	zsp Coae

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 Type of Action <u>Name</u> <u>Address</u> Title _____ _ _ _ _ _ _ _ _ _ Change _____ Remove ______ □ Change ____ Add _____ Remove _____ Change ____ Change □ Add ☐ Remove _____ Change □ Remove _□ Change

			·		
· · · · · · · · · · · · · · · · · · ·					
			_ -		
	· · · · · · · · · · · · · · · · · · ·				
			•		
					
	- "				
		····	-	· · · ·	
				· · · · ·	
					<u> </u>
					·
	· · · · · · · · · · · · · · · · · · ·				
 	1	· -		++	
				,	
					
				(4! 1)	
fective date, if other than the effective date is listed, the date is	ne date of filing:	he prior to date of	filing or more than 9	(opnonar) 0 days after filing.) P	ursuant to 605,020
ote: If the date inserted in this cument's effective date on the	block does not meet the	applicable stati	itory filing require	ments, this date wi	Il not be listed as
current series and on the	trepartment or istate or				
record specifies a delay	ed effective date, b	out not an ef	ective time, at	12:01 a.m. on	the earlier o
The 90th day after the re			·		
r: 1 20	2010				
ited February 20	2019	· · · · ·			
(han	de is	Busl			
	01 - 2		resentative of a mem		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00