1190000 22566

| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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FEB 2 1 2019 S. YOUNG



February 9, 2019

JEFFREY STEWART AUREUS LIMITED LLC 5151 SUNBEAM ROAD STE 11 JACKSONVILLE, FL 32257

SUBJECT: AUREUS LIMITED LLC

Ref. Number: L19000022566

We have received your document for AUREUS LIMITED LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 519A00002812

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COVER LETTER

| TO: | Registration Se Division of Cor | | | |
|----------|------------------------------------|--|---|--|
| enn m | Aureus Lir | mited LLC | | |
| SUBJE | .C.: | Name of Lin | nited Liability Company | <u> </u> |
| The end | closed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please | return all correspo | ondence concerning this matter | to the following: | |
| | | Jeffrey Stewart | | |
| | | Aureus Limited LLC | Name of Person | |
| | | 5151 Sunbeam Road, Suit | Firm/Company e 11 | |
| | | Jacksonville Florida 32257 | Address | |
| | | Jeff@blackcreekprecision. | | |
| | | | to be used for future annual report notifi | cation) |
| For furt | her information c | oncerning this matter, please c | all: | |
| Jeffrey | Stewart | | 770 480-4805 | |
| | Name o | f Person | at () Area Code Daytime | Telephone Number |
| Enclose | d is a check for th | ne following amount: | | |
| □ \$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:

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

| Aureus Limited LLC | | | |
|--|--|--|--|
| (Name of the Lim | ited Liability Comp (A Florida Limited | any as it now appears on our reco Liability Company) | ords.) |
| The Articles of Organization for this Limited I Florida document number L19000022566 | Liability Company | were filed on January 22nd | and assigned |
| This amendment is submitted to amend the fol | lowing: | | |
| A. If amending name, enter the new name of | of the limited liab | oility company here: | |
| The new name must be distinguishable and contain the | words "Limited Liab | lity Company," the designation "L | LC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if appli | cable: | 5151 Sunbeam Road | |
| (Principal office address MUST BE A STREA | | Suite 11 | |
| | | Jacksonville Florida 3225 | 7 24. 5 |
| Enter new mailing address, if applicable: | | 5151 Sunbeam Road | EB FEB |
| (Mailing address MAY BE A POST OFFICE | <u> BOX)</u> | Suite 11 | |
| | | Jacksonville Florida 3225 | 7 3 3 |
| B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent: | /or registered o | <u>e</u> : | ds, enter the name of the ne |
| New Registered Office Address: | 5151 Sunbeam Road, Suite 11 | | |
| | | Enter Florida street add | ress |
| | Jacksonville | | Florida <u>32257</u> |
| | | City | Zip Code |
| New Registered Agent's Signature, if changing | | | |
| I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as registery being filed to merely reflect a change in the company has been notified in writing of this | er and complete istered agent as p registered office | performance of my duties, provided for in Chapter 602 | and I am familiar with and 5, F.S. Or, if this document is |
| | If Cha | iging Registered Agent, Signatur | e of New Registered Agent |

Page 1 of 3

. 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> Darin Phipps | Address 7524 Fawn Lake Drive | Type of Action |
|--------------|-----------------------------|---------------------------------|----------------|
| MGR | | Jacksonville FL 32256 | Madd |
| | | | Remove |
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| | | January 31st, 2019 |
| (If an ef <u>Note:</u> | tive date, if other than the diffective date is listed, the date must be. If the date inserted in this blochent's effective date on the Dep | be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 ck does not meet the applicable statutory filing requirements, this date will not be listed as |
| If the re (b) The | cord specifies a delayed e 90th day after the recor | effective date, but not an effective time, at $12:01\ a.m.$ on the earlier of is filed. |
| Dated | January 31st | 2019 |
| | Allen V | Ho. 20 1 |
| | | In the state of a member or authorized representative of a member |

Page 3 of 3

Filing Fee: \$25.00