

L190000 25911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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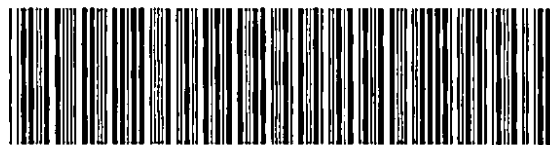
(Business Entity Name)

(Document Number)

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FEB 15 2019
S. YOUNG

19 FEB 11 PM 6:24
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ashton Infrastructure and Rehabilitation, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joel C. Ashton

Name of Person

Firm/Company

376 Cyclone Drive

Address

Ft. Pierce, FL 34951

City, State and Zip Code

Joel@asht-onliners.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joel C. Ashton 772 564-1379
Name of Person at Area Code Daytime Telephone Number

Enclosed is a check for the 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
266 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Ashton Infrastructure and Rehabilitation, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 1/24/19 and assigned
Florida document number L19000025911.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Ashton Infrastructure Rehabilitation, LLC

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 ADDRESS)

2880 Johnston Rd.

Ft. Pierce, FL 34951

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2880 Johnston Rd.

Ft. Pierce, FL 34951

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Ann M. Ashton

New Registered Office Address:

2880 Johnston Rd.

Enter Florida street address

Fort Pierce

Florida 34951

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.

Ann M. Ashton

If Changing Registered Agent, Signature of New Registered Agent

.. 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Ann M. Ashton	2880 Johnston Rd	<input checked="" type="checkbox"/> Add
		Ft. Pierce, FL 34945	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Change of Name, address + add
auth member enclosed

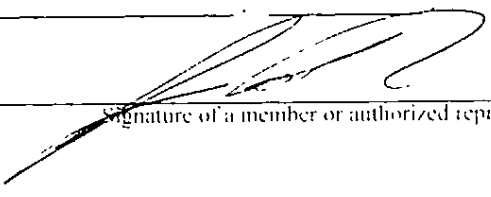
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 2/3/19


Signature of a member or authorized representative of a member

Joel C. Ashton

Typed or printed name of signer