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COVER LETTER

TO: Registration Section Division of Corporations

piler. LLC SUBJECT: Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Aaron V. John Collins Brown 756 Beachland 151vd. Address <u>Vero</u> Beach, FL. 32963 City/State and Zip Code Ohnson @ Vero Law. Com nail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (<u>772</u>) <u>231-4343</u> Area Code Daytime Telephone N aron 10500 Name of Person Daytime Telephone Number

Enclosed is a check for the following amount:

⊠ \$25.00 Filing Fee

S30.00 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 AMENDMEN TO ARTICLES OF ORGANIZATI OF			
THE BOILER LLC (Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company were filed on	/ZG/ZOI9 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here	5:		
The new name must be distinguishable and contain the words "Limited Liability Company," the desi	gnation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	*		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office address on or registered agent and/or the new registered office address here:	our records, <u>enter the name of the ne</u>		

	Cin	
		Florida
<u>Hen Registered office Radiess</u> .	Enter Florida street add	dress
New Registered Office Address:		
Name of New Registered Agent:	<u></u>	

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, <u>enter the title, name, and address of each person</u> being ad <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	<u>Type of Action</u>
AMBR	Kelly L. Smith	474 Waters Drive	Add
		Fort Pierce, FL. 34946	Remove
			Change
AMBR	Brian W. Smith	474 Waters Drive	Add
		Fort Pierce, FL 34946	Remove
			Change
			Add
			CRemove
			Change
			D Add
			C Remove
			Change
			🖸 Add
			Remove
			Change
			🗆 Add
		·	C Remove
			Change

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

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			. <u> </u>
			 <u> </u>
		<u> </u>	
			 ••

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_	June, 28	3 2019
	-•	
		/
		Signature of a member or authorized representative of a member
		JARED SWITH
		Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00