# 1190000 29931

(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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2019 NOV 18 PM 2: 55 SECREDARY OF STATE TALL AHASSEE, FLORIDA

Amend

DEC 1 6 2019 I ALBRITTON

### **COVER LETTER**

TO: Registration Se Division of Cor	porations		
	THE BO	LER, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Aaron V	Name of Person	
		Boun Barbett, Ch	td.
	756	Beach land blvd.	
	-	Address	
	Vero Beac	L, Fl. 32963	
	à phisme	Chy/State and Zip Code  Werolaw Com	
	E-mail address: (	to be used for future annual report notif	ication)
For further information co	oncerning this matter, please co	all:	
Arm V.	Johnson	at ( <u>772</u> ) <u>231 -</u> Area Code Daytime	4343
Name of	Person	Area Code Daytime	: Telephone Number
Enclosed is a check for th	e 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

The Boiler, LL				
( <u>Name of the Limited Li</u> (A F	iability Company as it now appears on our records.) Iorida Limited Liability Company)			
The Articles of Organization for this Limited Liabili Florida document numberL 90000293		_ and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the	e limited liability company here:			
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbre	viation "L.L.C."		
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET AL	DDRESS)			
registered agent and/or the new registered office	registered office address on our records, enter th	2019 NOV   8 Page 2: 55		
Name of New Registered Agent:		<del>.</del>		
New Registered Office Address:	Enter Florida street address			
	, Florida			
<del>-</del>	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 Title Name **Address Type of Action** AMBR Brian W. Smith ☐ Change ☐ Add ☐ Remove \_\_\_\_ Change ☐ Remove ☐ Change ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Remove ☐ Change

_	
_	
	<del></del>
_	
_	
(If an effec Note: If	e date, if other than the date of filing:
he reco The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
Dated _	Nauska 14th 2019.
	12
	Signature of a member of authorized representative of a member

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Filing Fee: \$25.00