(Requestor's Name) (Address)	
(Address)	100341978881
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	03/13/2001025010 **25.00
Certified Copies Certificates of Status	
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## **COVER LETTER**

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TO:	Registration Section
	Division of Corporations

Boiler, LLC SUBJECT: 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:

Heron ame of Person Collins Brown 'im/Company Verd land, Aud. sed for future annual report notification) -mail addr (10

For further information concerning this matter, please call:

at (\_\_\_\_\_)\_\_\_\_ Daytime Telephone Number Name of Person Area Code

Enclosed is a check for the following amount:

S25.00 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

Т	AMENDMENT O	
	ORGANIZATION OF	
The Briles 110	an <u>y as it now appears on our records.</u> ) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on ar	nd assigned
Florida document number <u>L190000 29931</u>	r (	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	<u>pility company here</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviati	on "L.L.C."
Enter new principal offices address, if applicable:		20
(Principal office address MUST BE A STREET ADDRESS)		2020 HAR
	<u> </u>	R
	•	<u>ل</u>
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		ame of the new
Name of New Registered Agent:		

<u>New</u>	Registered	Office	Address:
------------	------------	--------	----------

Enter Florida street address

\_\_\_\_\_

. Florida \_\_

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.

City

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

<u>Title</u> Name **Address Type of Action** Jared Smith Mak 1665 ERoserwood (+ 🗆 Add Vero Deach, Ft 32966 Remove Change bian Snith AMBR sters think 🗆 Add Fort More FL 3494 Remove Jan Pavid Smith as Tristec Change Jun Pavid Smith Revocable MGK 80 Royal Palm Point, site 300 & Add Vers beach 9 32960 □ Remove Change 🗆 Add □ Remove Change 🗆 Add □ Remove Change 🗆 Add Remove D Change

D.	If amending any other information, enter change(s) here: (Attach additional sheets, i	f necessary.	)
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E. Effective date, if other than the date of filing: <u>2127/2070</u> (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 top Mary 27 . 1020 Signature of a member or authorized representative of a member JANFO Sauth Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00