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C Kinsey

## **COVER LETTER**

TO: Registration So Division of Cor			
	US WELDING SERVICES LL	С	
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	·
Please return all correspo	ondence concerning this matter	to the following:	
	Demetric	SMITh Name of Person	
	Ambilious	Welding Servic	es LLC
	8762 Hart	A V C Address	
		City/State and Zip Code	<del>,</del>
	DEMETRIC E-mail address: (	TSMITHO yahou to be used for tuture animal/eport notif	ication)
For further information of	concerning this matter, please co		
Demetsic Name o	Smith of Person	at ( <u>772</u> ) <u>410 -</u> Area Code Daytime	7273 Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre	ec.	Street Address:	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMBITIOUS WELDING SERVICES LLC				
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Company were filed on $\frac{02}{10000000000000000000000000000000000$	/04/2019	ar	d assigne	rd
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability company h	<u>ere</u> :			
The new name must be distinguishable and contain the words "Limited Liability Company," the c	designation "LLC" or the a	bbreviati	on "L.L.C."	<del></del>
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		<del></del>		
			_ <u>~~~</u>	
Enter new mailing address, if applicable:		: <u>-</u>	2019 NOV 25	
(Mailing address MAY BE A POST OFFICE BOX)	<del>.</del> .	·- <del>:</del>	<del></del>	
		<u>.</u>		· ·
			\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	
B. If amending the registered agent and/or registered office address on our r	ecords, <u>enter the nar</u>	ne of th		<u>gisterec</u>
agent and/or the new registered office address here:				
Name of New Registered Agent:				
New Registered Office Address:				
	rida street address			
	, Florida			

## 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

Zip Code

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>	Address	Type of Action
AR	ANQUAN L CARTER	7920 MERRILL ROAD #308	□Add
		JACKSONVILLE, FL 32277	■Remove
			□Change
			□Add
			Remove
		<del></del>	□ Change
		<del> </del>	Remove
			□ Change
			□Add
			□Remove
			☐ Change
			🗆 Add
			□Remove
			Change
			□Add
			□Remove
			[]Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
yes the 10% of owenership that was
For Anguan Coster
Demetric Smith Will take that and let
the new percentage of OwnerShip read Demetric Smith with 70% owener
Ship & leave Michael L Smith with 30%
OWNERShip.
•
Effective immediately, Thank you so much!!!!
Inank you so muchini
E. Effective date, if other than the date of filing: 11-22-3019 (optional)  (It'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)(the 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 11-22-2019. Signature of a member or authorized representative of a member
Demetric T Smith

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Typed or printed name of signee

Filing Fee: \$25.00