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| (Requestor's Name) |
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| (Address) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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|--------------|------------------------------------|---|---|-----------------|--|------|
| | | vironmental Solutions | | | | |
| SUBJI | KC1: | Name of Lim | ited Liability Company | | | |
| The en | iclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | | |
| Please | return all correspo | ndence concerning this matter | to the following: | | | |
| | | David Mason | ٠. | | | |
| | | Veritas Environmental Solu | Name of Person | , , | - | |
| | | 27467 Notre Dame Blvd | Pirm/Company | | _ | |
| | | Punta Gorda, FL 33955 | Address | | - 201 | |
| | | dcmason09@gmail.com | City/State and Zip Code | | 2019 HAR - SECRETA FALLATIAS | A77 |
| | | E-mail address: (| to be used for future annual report notific | ation) | <u>설립</u> 두 | |
| For fu | rther information c | oncerning this matter, please ca | all: | | 59 24 | ם לנ |
| David | i Mason | | 239 234-3476 at () | | PM 12: 20 GF \$1 A (1) E. F1 (1) (1) | |
| | Name o | f Person | Area Code Daytime | Felephone Numbe | er t' | |
| Enclos | sed is a check for th | ne following amount: | | | | |
| ■ \$2 | 25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certifie | ate of Status & | |

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

| Veritas Environmental Solutions | |
|--|---|
| (<u>Name of the Limited Liability</u> (A Florida L | Company as it now appears on our records.) imited Liability Company) |
| The Articles of Organization for this Limited Liability Cor Florida document number <u>L19000041216</u> | mpany were filed on 2/11/2019 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, <u>enter the new name of the limite</u> | ed liability company here: |
| Enter new principal offices address, if applicable: | ed Liability Company," the designation "LLC" or the abbreviation "L.L.C." |
| (Principal office address MUST BE A STREET ADDRE | <u></u> |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 2019 |
| B. If amending the registered agent and/or registe | ered office address on our records, enter the name of the new ess here: |
| Name of New Registered Agent: | 12: 20 STATE LODGE |
| New Registered Office Address: | Enter Florida street address |
| | , Florida |
| | Circ Zio 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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-------------|--|--------------------------------------|
| MGR | David Mason | 27467 Notre Dame Blvd Punta Gorda, FL 33955 | ≣ Add |
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| E. Effect | 2/27/2019 ive date, if other than the date of filing: (optional) | |
| (If an eff Note: | fective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed tent's effective date on the Department of State's records. | |
| | cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies 90th day after the record is filed. | er of: |
| Dated / | 2/27/ 170/9 | |
| | Signature of a member or authorized representative of a member | |
| | David Mason | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00