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D SCOTT

JUN - 8 2019

COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: Dependible Monios A.S. Name of Limited Liabil	totose UC lity Company
The enclosed Articles of Amendment and fee(s) are submitted for	part at the
Please return all correspondence concerning this matter to the fo	
Dennis T Br	ime of Person
Dependiable (Movin J & Okenaties in war and Company
200 ruch Ro	ante 240 Address
Baynten Belch, Cityls	FC 334 2 Code
Chnology 330 E-mail address: (10 be used	Concil. com I for indire annual report notification)
For further information concerning this matter, please call:	
Dennio T Bunn a Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status	5.00 Filing Fee & S60.00 Filing Fee, ertified Copy dditional copy is enclosed) S60.00 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

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Li	mited Liability Company)
The Articles of Organization for this Limited Liability Con Florida document number <u>L190604489 G</u>	ipany were filed on Od 1418019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	d liability company here:
The new name must be distinguishable and contain the words "Limited	d Liability Company." the designation "LLC" or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:	Y 22
(Principal office address MUST BE A STREET ADDRE.	SS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent:	red office address on our records, <u>enter the name of the new</u> s <u>s here</u> :
New Registered Office Address:	Enier Florida street address
	Florida
New Registered Agent's Signature, if changing Registered .	Agent:
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nd agree to act in this capacity. I further agree to comply with the inplete performance of my duties, and I am familiar with and in as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability
	If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

	g Authorized Person(s) authorized to m I from our records:	anage, <u>enter the title, name, and add</u>	ress of each person being added
MGR = M $AMBR = A$	Janager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jude in Bowly	Boyston Geach, PC	2) Ge 20 add
		Boynton Beach, PC	3310 @ Remove
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ffective date, if other than t an effective date is listed, the date	the date of filing	cannot be	prior to date of	filing or m	ore than 90	(optio	nal) filing.) l	Pursuant	to 605.0
Sote: If the date inserted in this ocument's effective date on the	s block does not m	ieet the a	pplicable statt	nory filing	g requirem	ents, this	date w	ill not b	e listed
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e record specifies a delay	yed effective d	ate, bu	l t not an eff I	fective t	ime, at 3	2:01 a	.m. o	n the	earlier
The 90th day after the r	record is filed.								
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	Signature of a r	nember or	authorized rep	resentative	of a membe	·r			
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Filing Fee: \$25.00