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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: REGISTERED AGENTS INC. Account Name

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:		_
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BOSS INTERNATIONAL SERVICES LLC**

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOSS International Service					
(Name of the Limit	<u>ed Liability Compa</u> (A Florida Limited )	ny as it now appear Liability Company)	s on our records.)		
The Articles of Organization for this Limited Li Florida document number L19000074419	ability Company	were filed on 03	/15/2019	and assign	ed
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	-	ility company he	<u>:re</u> :		
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the d	esignation "LLC" or the	abbreviation "L.L.C	
Enter new principal offices address, if applic	able:	7901 4th St	N		<del></del>
(Principal office address MUST BE A STREET ADDRE		STE 300			
		St. Petersbu	irg FL 33702	202 SE	<del>-</del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7901 4th St STE 300	N	JUN 17 CRETARY O CAHASSEE	
		St. Petersbu	rg FL 33702	F STA	
B. If amending the registered agent and/ registered agent and/or the new registered of			our records, <u>ent</u>	er the name of	the new
Name of New Registered Agent:	Registere	d Agents Inc	·		
New Registered Office Address:	New Registered Office Address: 7901 4th		0		
		Enter Flor	rida street address		
	St. Peters		, Florida	33702	
		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

<u>Title</u>	Name	Address	Type of Action
MGR	BERKELEY, LISA A	7738 LINKSIDE LOOP	□ Add
		REUNION, FL 34747	⊠ Remove
			☐ Change
MGR	Leslie Berkeley	7901 4th St N STE 300	<b>⊠</b> Add
		St. Petersburg, FL 33702	Remove
			Change
			☐ Remove
			Сһалде
			Add
			Remove
			Change
			Add
			☐ Remove
			Change
			Remove
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Effective date, if other than the dat an effective date is listed, the date must be	te of filing:	to date of filing or more than	(optional)
Note: If the date inserted in this block document's effective date on the Depa	does not meet the applica	able statutory filing requi	rements, this date will not be listed
e record specifies a delayed e The 90th day after the record	ffective date, but nol I is filed.	t an effective time,	at 12:01 a.m. on the earlier
<sub>Dated</sub> June 17		·	
	Rilmy Park	orized representative of a m	

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Typed or printed name of signee

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