1190000 11956

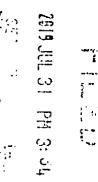
(Requestor's Name)
(Address)
(12.12.7)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Openial manadions to Filling Officer.

Office Use Only



500331994775

07/31/19--01013--003 ★♠25.00



Y SULKER AUG 0 6 2019

COVER LETTER

TO:	Registration Sec Division of Corp				
(1115 113	Icepopology				
SUBJECT:Name of Limited Liability Company					
The enc	closed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please r	return all correspo	ndence concerning this matter	to the following:		
		Domenic Chambers Jr.			
			Name of Person		
		Idepopology LLC			
			Firm/Company		
		1720 Boulder Street			
			Address		
		Jacksonville, FL 32207			
			City/State and Zip Code	<u></u>	
		icepopology@gmail.com		<u></u>	
		E-mail address: (to be used for future annual report notif	lication)	
For furt	ther information co	oncerning this matter, please ca	all:		
Domen	nic Chambers Jr.		904 424-1919 at ()		
	Name of	f Person	Area Code Daytimo	e Telephone Number	
Enclose	ed is a check for th	ne following amount:			
■ \$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Fitting 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

Icepopology LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabsellorida document number <u>L19000077956</u>	ility Company were filed on 03/20/2019	and assigned
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
The new name must be distinguishable and contain the word	Is "Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, ee address here:	enter the name of the no
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Fior	ida
	City	zip Carie

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 addor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Domenic Chambers Jr.	1720 Boulder Street	□ Add
		Jacksonville, FL 32207	Remove
			☐ Change
			☐ Remove
			Change
			Add
			Remove
			Change
			Remove
			☐ Change
		 	Remove
			Change
			Remove
			Change

_	
_	
-	
-	
-	
_	
=	
-	
-	
-	
-	
-	
-	
•	
-	
_	
(If an ef Note:	ive date, if other than the date of filing:
the re) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Senature of a member or authorized representative of a member
	Domenic Chambers Jr.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00