19000090449

(Requ	uestor's Name)	
(Addr	ess)	
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(City/	State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
. (Busi	ness Entity Name)
(Doce	ument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to Fi	ling Officer:	
Special Instructions to Fi	ling Officer:	

Office Use Only



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COVER LETTER

Registration Section

TO:

Division of Co	rporations		
JOHNSTO	ON'S LSC SOLUTIONS LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MICHAEL GRAHAM		
	3HL ACCOUNTANTS	Name of Person	
		Firm/Company	
	8461 LAKE WORTH RO.	AD SUITE 228	
		Address	
	LAKE WORTH, FL 3340	57	
	MGRAHAM@3HLACCO	City/State and Zip Code UNTANTS.COM	
	E-mail address: (to be used for future annual report not	tification)
For further information	concerning this matter, please co	all:	
MICHAEL GRAHAM		561 209-6010 at ()	
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Regist Divisi	JNG ADDRESS: ration Section on of Corporations tox 6327	STREET/COUR Registration Secti Division of Corpo Clifton Building	on
Tallah	assee, FL 32314	2661 Executive C	enter Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOHNSTON'S LSC SOLUTION LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{4/2/2019}{1}$ and assigned Florida document number L19000090649 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida 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

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
PRES	BOB JOHNSTON	155 FERNWOOD CRESCENT ROYAL PALM BCH, FL 33411	= Add
			□ Remove
			☐ Change
			D Add
			Remove
			Change
			Add
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ate, if other t	han the date o	f filing:			(ept	ional)	
e date inserted	n this block doe	s not meet the	e applicable st	of filing or more atutory filing re	than 90 days afte equirements, th	r filing.) Pursuant is date will not b	to 605,02 oc listed :
			out not an o	effective tim	e, at 12:01	a.m. on the ϵ	earlier
4/29		. 20	019				
	<i>c</i> '0						
	date is listed, the date inserted in effective date of specifies a conspective at the specifies and specifies and specifies are specifies and specifies are specifies and specifies are specifies and specifies are specified and specifies are specified are specified at the specified are specified at the specif	state is listed, the date must be speced date inserted in this block does effective date on the Department specifies a delayed effect h day after the record is	state is listed, the date must be specific and cannot be date inserted in this block does not meet the effective date on the Department of State's respectifies a delayed effective date, the day after the record is filed.	state is listed, the date must be specific and cannot be prior to date it date inserted in this block does not meet the applicable sureffective date on the Department of State's records. specifies a delayed effective date, but not an end of day after the record is filed.	e date inserted in this block does not meet the applicable statutory filing re- effective date on the Department of State's records. specifies a delayed effective date, but not an effective time h day after the record is filed.	e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after a date inserted in this block does not meet the applicable statutory filing requirements, the effective date on the Department of State's records. specifies a delayed effective date, but not an effective time, at 12:01 h day after the record is filed.	state is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant of date inserted in this block does not meet the applicable statutory filing requirements, this date will not be effective date on the Department of State's records. specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the children day after the record is filed.

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Typed or printed name of signee

Filing Fee: \$25.00