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(Re	equestor's Name)	
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COVER LETTER

Div	ision of Cor	porations	•	
SUBJECT:	Alliant Che	mical, LLC		
, obside i.		Name of Limi	ited Liability Company	
The enclosed	d Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Donald K LaFlamme		
		***************************************	Name of Person	
		Alliant Chemical, LLC		
			Firm/Company	
		12059 Mahogany Isle Land	:	
			Address	
		Fort Myers, Florida 33913		
		dklaflamme@alliantchemica	City/State and Zip Code al.com	
		E-mail address: (t	o be used for future annual report notific	cation)
For further in	nformation co	oncerning this matter, please ca	ill:	
Donald LaFI	lamme		812 606-1221	
	Name of	f Person		Telephone Number
Enclosed is a	check for th	ne following amount:		
z ∕ \$25.00 F	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)

MAILING ADDRESS:

Registration Section

TO:

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

Alliant Chemical, LLC			
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our imited Liability Company)	records.)	
The Articles of Organization for this Limited Liability Col	mpany were filed on August 05.	. 2019	_ and assigned
Florida document number L19000199072			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation	on "LLC" or the abbro	
Enter new principal offices address, if applicable:			7019 SER
Principal office address MUST BE A STREET ADDRE	<u> </u>		
			2) rm ω .
		ST ST ST	P.Y.
Enter new mailing address, if applicable:	4.1-	<u> </u>	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
3. If amending the registered agent and/or registe registered agent and/or the new registered office addre		ecords, enter th	ne name of the
egistered agent and/or the new registered office addre	100 1101 0		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida stree	t address	
	Cir.	, Florida	The Control
	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>	<u>Name</u>	<u>Address</u>	Type of Action
REP	Doria LaFlamme		□ Add
		12059 Mahogany Isle Lane Fort Myers, FL 33913	
			■ Remove
	Doria LaFlamme	12059 Mahogany Isle Lane	
MGR	Dona Cartainine	Fort Myers, FL 33913	A dd
			☐ Remove
		 	
			
			□ Remove
			☐ Change
	····		D Add
			☐ Remove
			Change
			□ Add
			☐ Remove
			
			Add
			☐ Remove
			□ Change

		4.5.
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	09-19-2019	
effective date is listed, the date te: If the date inserted in this	nust be specific and cannot be prior to date of filing or me block does not meet the applicable statutory filing Department of State's records.	ore than 90 days after filing.) Pursuant to 605.0207
record specifies a delay he 90th day after the r	ved effective date, but not an effective ti ecord is filed.	me, at 12:01 a.m. on the earlier o
ed 09-18	2019	
	Signature of a member or authorized representative	of a member
		or a manual
Donald K LaFlammo		

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Filing Fee: \$25.00