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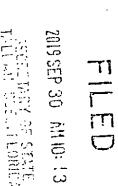
(Re	questor's Name)	
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OCT 1 6 2019

COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT:		Out-fi-Hers, l	LC
The enclosed Articles of Am	endment and fee(s) are subr	nitted for filing.	
Please return all corresponde	nce concerning this matter t	to the following:	
	Cheryl	Creason, EA	<u>.</u>
	Abacus	Business : Tax	Sus LLC
	105 77	Ave NE	
		Address	
	RUSKIR	1 FL 335	70
-	Jobench E-mail address: (4	City/State and Zip Code Fan 5 @ gmail o be used for future annual report notificat	- com
For further information conce			
Cheni Cr	eason	at (813) 645- Area Code Daytime Te	4000
Name of Per	rson	Area Code Daytime Te	lephone Number
Enclosed is a check for the fo	ollowing amount:		
\$25.00 Filing Fee [330.00 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
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

The Articles of Organization for this Limited Liability Company were filed on August 39,30 9 and assigned Florida document number L1900021076 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 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 Enter Florida Zip Code	Bad Boar Outf (Name of the Limited Liability Companion) (A Florida Limited L.)	1
A. If amending name, enter the new name of the limited liability company here: N	The Articles of Organization for this Limited Liability Company	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 Enter Florida	This amendment is submitted to amend the following:	
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 Enter Florida Tip Code	A. If amending name, enter the new name of the limited liabi	. ^
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 Zip Code	The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
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 City Zip Code	· · · · · · · · · · · · · · · · · · ·	1615 6th St SE Ruskin, PL 33570
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City Zip Code	• •	1615 6th St SE 8 RUSKIN, FL 3357.0°
New Registered Office Address: Enter Florida street address , Florida City Zip Code		
Enter Florida street address , Florida City Zip Code	Name of New Registered Agent:	
Enter Florida street address , Florida City Zip Code	New Registered Office Address:	
• City Zip Code		Enter Florida street address
Your Dagistared Agent's Signature if shaming Dugistared Agents	N. D. C. LA D. C. L. C. L. C. D. C. L. C.	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>		Address	Type of Action
<u>MGR</u>	Donald	R. Buzbee, JR	Ruskn, FL 335	Add
			Ruskn, FL335	フ ^レ ロ Remove
				E Change
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				□ Remove
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ii amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	•	
<u>Note:</u> If the d	te, if other than the date of filing:	207 () Las th
	specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier day after the record is filed.	of:
Dated	O9-23- Could Could Signature of a member of a member	
	Donald R. Buzbe, JR. Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00