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

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MAR 0 7 2020

S. YOUNG

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:		GBLOOD, LLC		
SUBJECT.		Name of Limi	ted 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:	
		ELIZABETH YOUNGBLO	OOD	
			Name of Person	·
FARM BUREAU INSUR			ANCE	
			Firm/Company	
		921 W. JAMES LEE BLV	D.	
CRESTVIEW, FL 32536			Address	
			City/State and Zip Code	
		LIZ.YOUNGBLOOD@FFE		
		E-mail address: (1	to be used for future annual report not	ification)
For further is	nformation c	oncerning this matter, please ca	ill:	
ELIZABETH YOUNGBLOOD Name of Person		850 603-5096		
		Area Code Daytin	ne Telephone Number	
Enclosed is	a check for th	ne following amount:		
■ \$25.00 l	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)
Re Di P.(dling Addres gistration S vision of C D. Box 632 Ilahassee, I	Section orporations 7	Street Address: Registration Set Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Tallahassee be Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LIZ YOUNGBLOOD, LLC

company has been notified in writing of this change.

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our recor Liability Company)	' <u>ds.</u>)
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000021787</u>	were filed on 01/14/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	2020 FEB
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		PROPERTY OF THE PROPERTY OF TH
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	ess
		Torida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, o provided for in Chapter 605	and I am familiar with and , F.S. Or, if this document is

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
AMBR	ELIZABETH YOUNGBLOOD	921 W. JAMES LEE BLVD.	≣ Add
		CRESTVIEW, FL 32536	□Remove
			Change
			□Add
			□Remove
		.	□ Add
			Remove
			□Change
			□Add
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fective o	date, if other than re date is listed, the dat	the date of fil	ing:	anto doto of filian o	than 00 day	(optional)	nt to 605 0207 (
ote: If th	he date inserted in th	his block does no	ot meet the appli	icable statutory fi	iling requirement	s after fillig.) Fursua s, this date will no	of be listed as t
ocument's	s effective date on t	the Department o	f State's record	S.			
	ecifies a delayed eff	fective date, but r	not an effective	time, at 12:01 a.i	m. on the earlier	of: (b) The 90th	day after the
is filed. FEB	BRUARY 7TH		2020				
is filed. FEB	BRUARY 7TH	(V	<u>-</u>				
is filed. FEB	BRUARY 7TH	a St	m				
l is filed.	BRUARY 7TH	Signature of	m	horized representa	tive of a member		