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COVER LETTER

Division of Cor		•	•
Alpha Ome	ega Trash Containers, LLC	,	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	BRIAN P BARNETT		
		are submitted for filing. matter to the following: T Name of Person Containers, LLC. Firm/Company Address City/State and Zip Code dress: (to be used for future annual report notification) case call:	
	Alpha Omega Trash Conta	iners. LLC.	
		Firm/Company	
	PO BOX 236727	Name of Limited Liability Company and fee(s) are submitted for filing. rating this matter to the following: BARNETT Name of Person nega Trash Containers. LLC. Firm/Company 236727 Address FL 32923 City/State and Zip Code a-otc.com E-mail address: (to be used for future annual report notification) matter, please call: at (
		Address	
	COCOA, FL 32923		
	bbarnett@a-otc.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please ea	all:	
BRIAN BARNETT		at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status &
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ction
D	. •	5	. •

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Alpha Omega Trash Containers, LLC				
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our recor Liability Company)	rds.)		
The Articles of Organization for this Limited Liability Company	were filed on 02/21/2020	and assigned		
Plorida document number L20000058885				
his amendment is submitted to amend the following:				
x. If amending name, enter the new name of the limited liab	oility company here:			
L.S. Sims & Associates, LLC				
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL	.C" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1			
Principal office address MUST BE A STREET ADDRESS)		<u> </u>		
				
inter new mailing address, if applicable:		29 SS		
Mailing address MAY BE A POST OFFICE BOX)				
		9:		
		10 _A		
. If amending the registered agent and/or registered office	address on our records, <u>ente</u>	r the name of the new registo		
gent and/or the new registered office address here:				
Name of New Registered Agent:				
New Registered Office Address:				
The state of the s	Enter Florida street addre	:88		
	, Florida			
	City	lorida 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 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
AMBR	Lucarelli, John G	1207 Marquise Court	≣ Add
		Rockledge, FL 32955	□Remove
			□Change
AMBR	Froman, Dylan R	1029 Genevieve Avenue	≣ Add
		Rockledge, FL 32955	□Remove
			□ Change
			Removes
		 	□Add
			□Remove
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Effective date, if othe fran effective date is tisted, Note: If the date inserted document's effective da	, the date must be specific ed in this block does no	and cannot be prior to of meet the applicab	date of filing or more	(option than 90 days after fil equirements, this d	ing.) Pursu	ant to 605 ot be list	5.0207 (ed as t
e record specifies a delay rd is filed.	yed effective date, but	not an effective tim	e, at 12:01 a.m. on	the earlier of: (b)	The 90th	day after	r the
Dated		7.7021	-·				
	/ ////+	fa nember or authori					

Filing Fee: \$25.00

Consent to Use of Name

The undersigned L.S. Sims and Associates, Inc., a Florida corporation hereby consents to the formation and registration of "L.S. Sims & Associates, LLC" with the State of Florida by Alpha-Omega Trash Containers, LLC, a Florida limited liability company, and affirms such consent here in writing pursuant to Fla.Stat. sec 605.0112(b).

This consent is valid for a period of one year or until L.S. Sims and Associates, Inc. changes its name whichever occurs first.

Dated: March 12, 2021

L.S. Sims & Associates, Inc.

Its: Vice President