L200000 86831

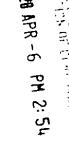
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	





400342755334

04/06/20--01033--011 **30.00





COVER LETTER

TO: Registration So Division of Con			•
A, R&R, S SUBJECT:	ite Prep LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing	
	ondence concerning this matter	-	
	James R. Collins		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	A, R&R, Site Prep LLC		
		Firm/Company	
	PO Box 340		
		Address	
	Macclenny, FL 32063		
		City/State and Zip Code	
	cincoll@comcast.net		
	E-mail address: (to be used for future annual report no	tification)
For further information of	concerning this matter, please c	atl:	
James R. Collins		904 259-4774	
Name o	of Person	Area Code Daytir	me 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)
Mailing Address		Street Address:	ection
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A, R&R, Site Prep LLC		
(Name of the Lim	ited Liability Company as it now ap (A Florida Limited Liability Compar	pears on our records.) ny)
he Articles of Organization for this Limited I	Liability Company were filed on	March 20, 2020 and assigned
lorida document number 1.20000086831	·	
his amendment is submitted to amend the fol	lowing:	
. If amending name, enter the new name	of the limited liability company	y here:
ne new name must be distinguishable and contain the	words "Limited Liability Company," t	he designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	
rincipal office address MUST BE A STRE	ET ADDRESS)	
	74 E	26
		7 767.
nter new mailing address, if applicable:		APR ST
failing address MAY BE A POST OFFICE	<u>BOX)</u>	<u> </u>
		7
		?
		ir records, enter the name of the new register
ent and/or the new registered office addre	ess here:	
Name of New Registered Agent:	James R. Collins	
New Registered Office Address:	11837 State Road 121 N.	
<u> </u>	Enter	Florida street address
	Macclenny	. Florida ³²⁰⁶³
	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
MGR	A, R&R, INC.	11837 SR 121 NORTH	
		MACCLENNY, FL 32063	≡ Remove
			□Change
MGR	JAMES R. COLLINS	11837 STATE ROAD 121 N.	≣ Add
		MACCLENNY, FL 32063	□ Remove
			□Change
			
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			Remove
			□Change
		 	□Add
			□ Remove
			[] Change

, As	<u>y 1</u>				
	· · · · · · · · · · · · · · · · · · ·				 -
				<u></u>	
				-	
			· 	 .	
					
					
					
			<u>, </u>		
					
					••
		<u> </u>		-	<u> </u>
		03/20/2020			
Effect	ive date, if other than the date fective date is listed, the date must be spe	of filing:	- Jan CCU	(optional)	4.15.05.15.15.
Note:	If the date inserted in this block do	es not meet the applica	ble statutory filing requ	rements, this date will not be	o 605.0207 (3) c listed as the
docun	nent's effective date on the Departm	nent of State's records.			
he recor ord is fi	d specifies a delayed effective date,	but not an effective tin	ne, at 12:01 a.m. on the	earlier of: (b) The 90th day	after the
010 18 11	ica.				
	April 3	2020			
Dated		 -	_ •		
		2 Andr			
	Signati	ure of a member or author	rized representative of a me	ember	
	James R. Collins				

· , · ·

Filing Fee: \$25.00