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Division of Corporations	
SUBJECT: FID BAYER Name of L	imited Liability Company
The enclosed Articles of Amendment and fee(s) are so	ubmitted for filing.
Please return all correspondence concerning this matter	er to the following:
	A. Joya Torres Name of Person
$\underline{\hspace{1cm}}$	Bail Bonds Inc
3055	Scenic Hwy, SteA.
	ring FL 33870 City/State and Zip Code
hdbail E-mail address	City/State and Zip Code CONCISCO WOLLCOM (to be used for Nature suchual report notification)
For further information concerning this matter, please	call:
Dayane Zamora-	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee	☐ \$55.00 Filing Fee & ☐ \$60.00 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	Street Address: Registration Section Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

TO ARTICLES OF ORGANIZATION OF

Submit Bonds (Name of the Limited Liability Compile (A Florida Limited)	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number P26 000 / 0223	were filed on
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3055 Scenic Hw, suite A
(Principal office address MUST BE A STREET ADDRESS)	Sebring, FL 33970
Enter new mailing address, if applicable:)EC - P
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	డు address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:Arch	res A. Jova Torres
New Registered Office Address: 2055	Scenic Henry Shela
	Sebring Florida 33870 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Dayane Zamora Alvan	- 3055 Scenic Hwy vez Sebring FL 338	□Add
			□Change
			🗆 Add
			□Remove
			Change Change DE Add II
			POREMOVE POR
			Ω Ω □Change
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			□Remove
			□Change

				
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n effective date is listed, <u>te:</u> If the date inserte		cannot be prior to date of eet the applicable stat	tiling or more than 90 days	Optional) after filing.) Pursuant to 605.020 , this date will not be listed as
s filed.			2:01 a.m. on the earlier o	of: (b) The 90th day after the
.cd 11/as/a	Signature of a m	DOOD .	MGR presentative of a member	