

L20 000103 565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

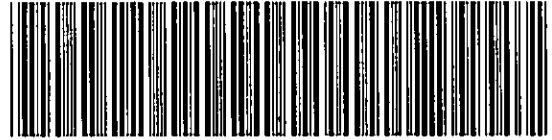
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

L1065-Corp form, LLC

Office Use Only



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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: National Information and Training Services LLC
DOCUMENT NUMBER: 120000103565

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KAREN CROWTHER
Name of Contact Person

NITS
Firm/ Company

8831 BUSINESS PARK DRIVE 5301
Address

FORT MYERS, FL 33919
City/ State and Zip Code

Kcrow@qmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Crowther at (239) 561-2600
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 JUL 01 AM 9:13

July 8, 2020

KAREN CROWTHER
8831 BUSINESS PARK DR S-301
FORT MYERS, FL 33912

SUBJECT: NATIONAL INFORMATION AND TRAINING SERVICES LLC
Ref. Number: L20000103565

We have received your document for NATIONAL INFORMATION AND TRAINING SERVICES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 620A00013280

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: National Information and Training Services, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karen Crowther
Name of Person

National Information and Training Services
Firm/Company

8831 Business Park Dr
Address

Ft. Myers, FL 33912
City/State and Zip Code

k.crowther@cfssroofing.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Crowther at (239) 481-1700
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount: Already sent check

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

National Information & Training Services, LLC 2:36
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/15/2020 and assigned
Florida document number L20000103565

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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:

Karen Crowther

New Registered Office Address:

8831 Business Park Dr

Enter Florida street address

Ft. Myers

City

Florida

33912

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.

Karen Crowther

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Karen Crowther	8831 Buena Vista Park Dr	<input type="checkbox"/> Add
		FT Myers FL 33907	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Pres	Karen Crowther	8831 Buena Vista Park Dr	<input checked="" type="checkbox"/> Add
		FT Myers FL 33912	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

15 Jul 2620
Karen Crowder
Signature of a member or authorized representative of a member

KAREN CROWTHER
Typed or printed name of signee

Filing Fee: \$25.00