L70000163278

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COVER LETTER

Registration Section Division of Corporations

TO:

SHR IFCT.		UV Sanitower, LLC	
SUBJECT.		nited Liability Company	
SUBJECT:			
Please return all corresp	ondence concerning this matter	to the following:	
	Bonni McMullen		
		Name of Person	
	UV Sanitower, LLC		
		Firm/Company	
	4228 53rd Avenue East		
		Address	· · · · · · · · · · · · · · · · · · ·
	Bradenton, Florida 34203		mc Telephone Number \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) ection orporations Tallahassee oe Street, Suite 810
		City/State and Zip Code	
	bon.mcmullen@gmail.com		
	E-mail address: (to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
Brenden Moriarty		941 749-0075	
Name o	of Person	Area Code Daytim	ne Telephone Number
Enclosed is a check for t	he following amount:		
≘ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration S Division of C	Section Corporations 7	Registration Sec Division of Cor The Centre of T	porations Sallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UV SANIT	OWER, LLC
(Name of the Limited Liability Comp (A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L20000163278	y were filed on June 12, 2020 and assigned
This amendment is submitted to amend the following:	The state of the s
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4228 53rd Avenue East
(Principal office address MUST BE A STREET ADDRESS)	Bradenton, Florida 34203
Enter new mailing address, if applicable:	4228 53rd Avenue East
(Mailing address MAY BE A POST OFFICE BOX)	Bradenton, Florida 34203
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter Florida street address
	, Florida
	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 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
			DAdd
			ZJRemove
			[]('hange
 .			□Add
			□Remove
			[]Change
			IJAdd
			[]Remove
			TChange
			□Add
			□Remove
			□Change
			JAdd
			Z!Remove
			Il Change
			□Add
			Ti thomas

If amending any other inf	formation, enter change(s) here: (Attach additional sheets, if necessar	y.)
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		<u>.</u>
		
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Note: If the date inserted in the	the date of filing:	Pursuant to 605.0207 will not be listed as
e record specifies a delayed eff d is filed.	fective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The	90th day after the
Dated	. 2020	
	Bonni Elmenicles -	
	Signature of a member or authorized representative of a member	
	Bonni McMullen	
	Typed or printed name of signee	

Filing Fee: \$25.00