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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations		•
	100/40/12 500	WE ILC.	
SUBJECT: H	1ARSHALL SER Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
		-	
Please return all correspo	ondence concerning this matter	to the following:	
	Λ	0.00011011	
	AUDIA N	NARS HAW	
		Name of Person	
	A Marsh	ALL SERVICE (LLC.
		Firm/Company	
	70-0	- 1 - 1	
	1958 Campi	oell Town Ct. Address	
	Jacksonville	City/State and Zip Code	
		City/State and Zip Code	
	<u>ADM8133</u>	3 O GMAIL . CON	<u> </u>
	E-mail address: (to be used for future annual report noti	fication)
For further information of	oncerning this matter, please co	all:	
0	2011-041	and 1000 1	2000
PUDRA MAR	f Person	at (<u>904</u>) <u>600 - 2</u> Area Code Daytim	e Telephone Number
		·	·
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &
	Certificate of Status	(additional copy is enclosed)	Certified Copy
			(additional copy is enclosed)
Mailing Addres	·«•	Street Address:	
Registration :		Registration Se	ction
Division of C	=	Division of Cor	=
P.O. Box 632	.7	The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

FILED

(A Florida Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) SECRETARY OF STATE TALL AHASSEE. FL TALL AHASSEE. FL 7, 2020 and assigned Florida document number 2000 1935 36 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 "LLC." 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 regist agent and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	A MARS HALL SERVI	ICE LU 2020 AUG -4 PM 7:15
Florida document number 2000 1935 3 6 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 "L.C." 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 registagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	(Name of the Limited Liability Com (A Florida Limite	id Liability Company) SECRETARY OF STATE TALLAHASSEE FI
Florida document number 2000 1935 3 6 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 "L.C." 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 registagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	The Articles of Organization for this Limited Liability Compar	ny were filed on July 7, 7020 and assigned
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 "LLC." 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: New Registered Office Address: Enter Florida street address	Florida document number <u>LZ 0000 1935 3 6</u>	
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Name of New Registered Agent: New Registered Office Address: Enter Florida street address	B. If amending the registered agent and/or registered office	e address on our records, enter the name of the new registe
New Registered Office Address: Enter Florida street address	agent and/or the new registered office address here:	
Enter Florida street address	Name of New Registered Agent:	
	New Registered Office Address:	
		Enter Florida street address
, Florida,		, Florida
City 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
AMBR	Audia Marshall	7950 campbell two ct. Jax. H. 3	DGG <u>G</u> Add
			□Remove
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an effective date is ote: If the date i	other than the date o listed, the date must be spec nserted in this block doe ve date on the Departme	eific and cannot be prior to c es not meet the applicable	date of filing or more than e statutory filing requir	(optional) 90 days after filing.) Pursua rements, this date will no	nt to 605,0207 t be listed as
				arlier of: (b) The 90th o	lay after the
nted 07, 2	8.2020 J. Ma Signatur Aude A	,			
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