# L20000251995

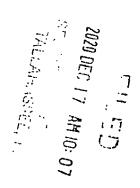
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Dig It Excavation 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:
James A. Lenahan Name of Person
Dig It excavation 11c
5567 leaning oak Dr.
City/Stake and Zip Code  City/Stake and Zip Code  digitax Cavation @ gmail.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
James Alexahan at 352 1982-8882  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$60.00 Filing Fee & Certificate of Status \$\Bigcup \\$60.00 Filing Fee & Certificate of Status & 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

	ation 11c	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number <u>L 2000</u> 251995	were filed on 8 17 202	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		202
(Principal office address MUST BE A STREET ADDRESS)		000
		C 7
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<del>- 5 5</del>
Induing datess MAT BE A 1031 OF THE BOAT		07
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the n</u> a	ame of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<del> </del>
	, Florida	
- <del></del>	City , Fiorida	Zin 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>	Name	<u>Address</u>	Type of Action
MGR	Jame A. Lenahan	5507 leaning Dak Dr Metrose, Fl. 32666	EAdd
		metrose, Fl. 32666	□Remove
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		<del></del>	□Remove
			□Change
			□Add

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Note: If	date, if other than the date of filing:
he record s ord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	12/14 7020
	Signature of a member or authorized representative of a member