Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALING CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (323)372-3532

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN C25 PIT LLC

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K. SALY

DEC 13 2024

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COVER LETTER

	tion Section of Corporations					
	PIT LLC					
SUBJECT: Name of Limited Liability Company						
The enclosed Art	eles of Amendment and fee(s) are submitted for filing.					
Please return all o	prespondence concerning this matter to the following:					
	Mike Town					
	Name of Person					
	Legalzoom.com, inc.					
	Firm/Company					
	9900 Spectrum Dr					
	Address					
	Austin, TX 78717					
	City/State and Zip Code jimmy@jack-n-bore.com					
	E-mail address: (to be used for future annual report notification)					
For further inform	ation concerning this matter, please call:					
Mike Town	800 773-0888					
	at () Name of Person Area Code Daytime Telephone Number					
Enclosed is a che	k for the following amount:					
□ \$25.00 Filing	Fee					

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 ${\bf STREET/COURTER\, ADDRESS;}$

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Ta:

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



C25 PIT LLC

(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 10/13/2020 and assigned Florida document number L20000323509 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: New Registered Office Address: Enter Florida street address _, Florida ___ 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

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

To

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	CHARLES D JURGENS		□ Add
		13208 RED BONE AVE. BROOKSVILLE, FL 34614	■ Remove
			🗖 Change
			D Add
			Addition To Addition
			Change PA
			□ Remove
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From: Rejiv Srivas
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