621 000 3625ZF

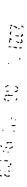
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit)	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



300364774433

04/30/21--01007--025 **25.00



1... 10.A

COVER LETTER

TO:	Registration S Division of Co			
cup ir	Cirt	McKing Toxtod	Somiant 110	
SUBJE	C1:	Name of Lir	nited Liability Company	<u></u>
The enc	losed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please r	eturn all correspo	ondence concerning this matte	r to the following:	
		Services CLC Name of Limited Liability Company es of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following: Services CLC		
			Same of Person	
		McKiam	Touched Sonious 110	
			Firm/Company	
		90-	- th	
		<u> </u>	1.W. 213'SI.	
		Micni God	ens, FL, 33056	
		Sansen E-mail address:	3372@Gmill.com	fication)
T 6 4			•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
For furt	ner information (concerning this matter, please of	call:	
9	mck:	aacu	ar (454) 274 - 41	550
	Name o	of Person	Area Code Daytim	e Telephone Number
Enclose	d is a check for t	he following amount:		
⊵ \$25	.00 Filing Fee	-	Certified Copy	Certificate of Status & Certified Copy
	Mailing Address		Street Address: Registration Sec	etion
	Division of C		Division of Cor	
	P.O. Box 632		The Centre of T	
	Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit	Toosted Services LLC ted Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
	(A Florida Limited Liability Company)	
The Articles of Organization for this Limited I.	iability Company were filed on	6/9020 and assigned
Florida document number <u>L200636852</u>	7	
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	of the limited liability company here:	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the design	nation "LLC" or the abbreviation "L.L,C."
Enter new principal offices address, if applic	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	ROY)	
(Maning duaress MAT BE A TOST OF FICE	<u></u>	
B. If amending the registered agent and/or agent and/or the new registered office addre	•••	rds, enter the name of the new registered
agent and/or the new registered office addre	ss nere:	• •
Name of New Registered Agent:		
New Registered Office Address:	2931 N.W. 213th Street Enter Floridas Micmi Gardens	street address
	Micmi Gardens	Florida 33056 =
	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.

						·				
										 -
				_						
		_								
										
		· · · · · · · · · · · · · · · · · · ·								
ote: If th	ate, if other to e date is listed, the e date inserted effective date	in this bloc	k does not	meet the a	pplicable s	of filing or natutory filin	ore than 90 da g requiremen	(option ally safter fillings after fillings, this date of the control of the con	al) ing.) Pursuant ate will not b	to 605.0207 be listed as
ecord spe is filed.	cifies a delayed	d effective o	late, but no	n an effect	ive time, at	12:01 a.m.	on the earlie	r of: (b)	The 90th da	y after the
nted <u>(</u>	54/27			2020	<u>)</u> .					
	I			/ -						
		8	\sim	\mathcal{A}						
-	<u>-</u>	Du Si	gnature of a	member or	authorized	epresentative	of a member			