# 121000024914

(Red	questor's Name)
(Add	dress)
(Add	dress)
(City	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bus	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to I	Filling Officer:
	Received 07/06
	07/06

Office Use Only 07/07/2/



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 18, 2021

WEUSI WALKER 4604 49TH STREET NORTH SUITE 1302 ST. PETERSBURG, FL 33705

SUBJECT: KANDU DUMPSTERS LLC

Ref. Number: L21000024914

We have received your document for KANDU DUMPSTERS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Summer Chatham OPS

Letter Number: 921A00013720

RECEIVED

⋗

### **COVER LETTER**

TO: Registration División of C						
	umpsters	•				
SUBJECT:	Name of Lim	ited Liability Company	y	<u>.</u>		
The enclosed Articles	of Amendment and fec(s) are sub	mitted for filing.				
Please return all corres	pondence concerning this matter	to the following:				
	Weusi Waller					
		Name of Person	n	_		
	Kandu Dumpsters					
	Firm/Company					
	4604 49th Street North Sui	ite 1302				
	Address					
	St.Petersburg , Florida 337	705				
		City/State and Zip (	l'ode			
	yesh1487@gmail.com					
	E-mail address: (	to be used for future as	mual report notification	on)	<b>~</b> .,	٠,
For further information	concerning this matter, please co	all:			7071	
Weusi Waller		727 at (	385-6885		,	:
Name	of Person	Area Code	Daytime Tele	phone Number	o-	
					<b>&gt;</b>	•
Enclosed is a check for	the following amount:				11: 2	• •
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Certified Cop (additional copy	ру	Certified C	rg Fee, of Status &	
<u>Mailing Addr</u>	ress:	<u>Stre</u>	et Address:			
Registration		•	gistration Section			
Division of P.O. Box 63	Corporations 327		vision of Corpora e Centre of Tallal			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF,

Kandu Dumpsters				
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)		
ne Articles of Organization for this Limited	Liability Company were filed on $\frac{J_0}{J_0}$	anuary 11th 2021	and as	signed
orida document number 700357832017				
is amendment is submitted to amend the fo	Howing:			
If amending name, enter the new name	of the limited liability company l	<u>here</u> :		
new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the a	ibbreviation "L	.L.C."
ter new principal offices address, if appli	icable:			
rincipal office address MUST BE A STRE	ET ADDRESS)			
	<del> </del>			<del></del>
			123 123 123	·. /
ter new mailing address, if applicable:	<del></del> -		<u> </u>	<del> ;</del> -
<u>ailing address MAY BE A POST OFFICE</u>	(EBOX)		;-= <del></del> -	
			r)	
			$\triangleright$	· 1
If amending the registered agent and/or	registered office address on our	records, <u>enter the n</u> ar		w registe
ent and/or the new registered office addre	ess here:		2น	
Name of New Registered Agent:	Weusi Waller		<del></del> .	<u>.</u>
New Registered Office Address:	4604 49th street North			
<del></del>	Enter Flo	orida street address		
	Saint Petersburg	, Florida 33	3709	
	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 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

<u>Title</u>	<u>Name</u>	Address		Type of Action
mgr	Harriet Davis	1161 Williams Drive South		□Add
		St.Petersburg , Florida 33705		■Remove
			<u>-</u>	□Change
ambr	Natasha Hall	2910 50th Avenue South		□ Add
		St.Petersburg , Florida 33712		\@Remove
			2921	□Add
			Ξ.	•
		- <del></del>		□Remove
			<u>&gt;</u>	 □Change
			: 2น	
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				🗆 Remove
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				[] Remove
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				Change

EIN Assigned: 86-1515056		
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	<u>:</u>	
e date, if other than the date of filing:  Annuary 5th, 20  Annuary 5th, 2	(optional) late of filing or more than 90 days after filing.) Put	
I specifies a delayed effective date, but not an effective time, ed.	at 12:01 a.m. on the earlier of: (b) The 90	th day after
Ja Mary 5 2021		

ET CALOR