

L21000103764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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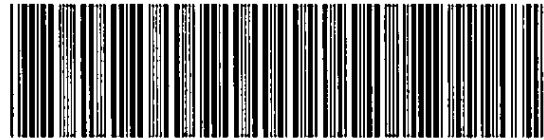
(Business Entity Name)

(Document Number)

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06/09/21--01015--009 \*\*25.00

2021 JUN 10 10:30 AM

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Fortied Solutions 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:

Jodi Jones

Name of Person

Fortied Solutions LLC

Firm/Company

5021 Shelley Ct

Address

Lakeland FL 33805

City/State and Zip Code

fortifiednow@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jodi Jones

Name of Person

at ( 863 ) 604-1611

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
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**

Fortified Solutions 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 03/03/2021 and assigned Florida document number L21000103764.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Fortified Solutions LLC

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)**

Same: 5021 Shelley Ct  
Lakeland, FL 33805

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

Same: 5021 Shelley Ct  
Lakeland, FL 33805

**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:**

Jodil Jones

**New Registered Office Address:**

same: 5021 Shelley Ct  
Enter Florida street address  
Lakeland Florida 33805  
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.*

Jodil Jones

**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>	<u>Address</u>	<u>Type of Action</u>
MGR AP	Timothy P Jones	5021 Shelley Ct	<input type="checkbox"/> Add
		Lakeland, FL 33805	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jodi L Jones	5021 Shelley Ct	<input checked="" type="checkbox"/> Add
		Lakeland, FL 33805	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated June 7 2021.

Joe L. Lees

Signature of a member or authorized representative of a member

Jodi L Jones

Typed or printed name of signee