L21000144065

(R	equestor's Name)	
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PICK-UP	MAIT	MAIL
(B)	usiness Entity Name)	
	ocument Number)	
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Se Division of Cor			
	Gas Services LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	_	
	James G. Housholder		
		Name of Person	
	Volunteer Gas Services		
		Firm/Company	
	1405 S. Central Ave.		
		Address	
	Flagler Beach FL 32136		
		City/State and Zip Code	
	volunteergasservices@gma		
For further information of	E-mail address: (to be used for future annual report notif all:	ication)
Dawn Housholder		412 337.8348 at ()	
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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

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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

Volunteer Gas Services LLC		
(Name of the Limited Linbility Compa (A Florida Limited L	ny as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Company	were filed on 3/29/2021	and assigned
Florida document number L21000144065		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
N/A		~3
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation L.L.C."
Articles of Organization for this Limited Liability Company da document number 121000144065 Amendment is submitted to amend the following: Tamending name, enter the new name of the limited liable we name must be distinguishable and contain the words "Limited Liable r new principal offices address, if applicable: Cipal office address MUST BE A STREET ADDRESS) The new mailing address, if applicable: Cling address MAY BE A POST OFFICE BOX) The amending the registered agent and/or registered office.	1405 S Central Ave	
(Principal office address MUST BE A STREET ADDRESS)	Flagler Beach FL 32136	三三三
		A P
		17. N
Enter new mailing address, if applicable:		n : w
(Mailing address MAY BE A POST OFFICE BOX)		[7]
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	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 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	Deborah Thomas	3 Red Fox Lane Flagler Beach FL 32136	□Add
			■Remove
			□Change
AMBR	Timothy A. Housholder	508 Park Lane Andersonville TN 37705	□Add
			■Remove
			□ Change
			□Add
			202 Remove
			□Change
			32 □Remove
			□Change
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	12/15/202	3		
ective date, if other than the reffective date is listed, the date mus	date of filing:		c than 90 days after fil	al) line) Pursuant to 605 (
te: If the date inserted in this blowment's effective date on the D	ock does not meet the appli	cable statutory filing		
tunem 3 erroen to due on the D	epartition of State 3 lectra.	•		
ecord specifies a delayed effectives filed.	e date, but not an effective	ime, at 12:01 a.m. of	n the earlier of: (b)	The 90th day after
December 15	, 2023	·		
	Signature of Amember or aut	halden		

Filing Fee: \$25.00