621000171144

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(Address)
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(City/State/Zip/Phone #)
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TALLAMASSEE EN SECRETAANY OF STATE 2022 UCH 31 AM 11: 01

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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Divis	sion of Cor	porations			
	Squire Hau	ling, LLC			
SUBJECT:		Name of Lin	nited Liability Company		
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return a	all correspo	ondence concerning this matter	to the following:		
		Craig Squire			
			Name of Person		
		Squire Hauling, LLC			
		· · · · · · · · · · · · · · · · · · ·	Firm/Company		
		1521 Cassius Street			
		· · ·	Address		
	Squire Hauling, LLC Firm/Company 1521 Cassius Street Address Lutz, FL 33549 City/State and Zip Code Squirehaulingllc@gmail.com E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: Craig Squire Name of Person Name of Person Area Code Daytime Telephone Numinclosed is a check for the following amount: \$\begin{array}{c} \text{Name of Person} \text{				
		5		2022 SEC	ورمم
				OCT OCT PRETA	
For further inf	formation c	oncerning this matter, please c	call:	2022 OCT 31 AHII: OI SECRETARY OF STATI	∵î o=j
Craig Squire			· · · · · · · · · · · · · · · · · · ·	ES T	enter Sec.
	Name o	f Person		구절 으	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 Fil	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certificat (additional copy is enclosed) Certified	te of Status &	
Regi	ing Addres	Section	Street Address: Registration Section		
	sion of C Box 632	orporations 7	Division of Corporations The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as it now ap (A Florida Limited Liability Compan	pears on our records.)
The Articles of Organization for this Limited Florida document number L21000171144	Liability Company were filed on	4/13/2021 and assigned
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company	<u>v here</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," ti	he designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	SEC.
		AR O T
		25 3
Enter new mailing address, if applicable:	 	<u> </u>
Mailing address MAY BE A POST OFFICE	<u> </u>	ET TO
		FA O
B. If amending the registered agent and/or agent and/or the new registered office addr		r records, <u>enter the name of the new regist</u> e
Name of New Registered Agent:	Craig M. Squire	
New Registered Office Address:	1521 Cassius Street	
	Enter	Florida street address
	Lutz	, Florida 33549
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Squire Hauling, LLC

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
CEO	Lauren Squire	1521 Cassius Street	
			≣Remove
		····	Change
CEO	Craig Squire		□Add
			□Remove
		1521 Cassius Street	■Change
			2020 OCT
			DAdd OCT Bremove NHChange TALLAHASSEE FL GAdd OT STATE
	<u> </u>		FA O Add
			Remove
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		- 11 - 11 - 11 - 11 - 11 - 11 - 11 - 1	□Add
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			Change

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