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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT: Bass	ett's Junk	Remwal	Service	LLC
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	idence concerning this matter	to the following:		
	Patrick B	Name of Person		
	Bassett's J	Firm/Company	Nal Sei	NIG LLC
	4320 Daz	Address		
	Jacksonvi	City/State and Zip Code	<u> </u>	
	E-mail address: (to be used for future annual	report potification)	
For further information co	ncerning this matter, please ca		report notification)	
Patrick B	USSCH Person	at (<u>JOV</u>) Area Code	655 - 69	342 B
	. tisen	Area Code	Daytine relepto	one Number
Enclosed is a check for the	following amount:			A II
L \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Se Division of Co P.O. Box 6327	ection rporations	Divisio	ddress: ation Section n of Corporatio ntre of Tallahas	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

111

Dassett's Junk Kemwal Denile, LCC
(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 $\frac{4/11(2021)}{2021}$ and assigned Florida document number $\frac{1.21000188381}{2021}$.
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
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)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
City Sip 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 = Au	ithorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Patrick Bassett	4320 Dazet Ct.	Cladd
		4320 Dazet Ct. Jacksonville PL 32210	_ □Remove
			□Change
			🗆 Add
			□Remove
			□ Change
			🗆 Add
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ffective date, if oth	er than the date o	of filing:				 (optional)	24	
ffective date, if oth an effective date is listed fote: If the date inser ocument's effective d	d, the date must be spe- ted in this block doc	cific and cannot es not meet th	e applicable		ore than 90 day	s after filing.) Pursuant	
record specifies a del: l is filed.	ayed effective date,	but not an eff	ective time,	at 12:01 a.m.	on the earlier	of: (b) Th	e 90th da	ny after the
ated <u>May 1</u>	2	2()21					
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Typed or printed name of signee