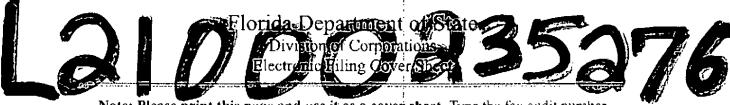
7/22/2021

Division of Corporations

Page 1 of 4



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

Fax Number : (850)617-6383

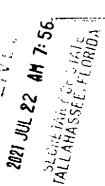
From:

Account Name : API PROCESSING Account Number : I20110000069 Phone : (954)567-0013

Fax Number : (954)567-3401

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: kathy@apiprocessing.com



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Help

H21000279855 3

## ARTICLES OF AMENDMENT Page 2 of 4 TO ARTICLES OF ORGANIZATION OF

Father and Son Me			
(Name of the Limited L	y as it now appears ibility Company)	on our records.)	<del></del>
The Articles of Organization for this Limited Liability Company w	vere filed on	May 20, 2021	and assigned
Florida document numberL21000235276	:		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ty company her	:2:	
The new name must be distinguishable and contain the words "Limited Liabilie	y Company," the de-	signation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	:	<b>⋝</b> ∪	20
(Principal office address MUST RE A STREET ADDRESS)	:		
THE PROPERTY OF THE PROPERTY O	:		
		·	22
Enter new mailing address, if applicable:		<u> </u>	
J , ,,,	;		
Mailing address MAY BE A POST OFFICE BOX)	<del></del>		_ <del>-</del>
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	dress on our rec :	cords, <u>enter the name</u>	of the new register
Name of New Registered Agent:		·	
New Registered Office Address:	:		
	Enter Floria	la street address	
		, Florida	
	City ·		Zip Code
Sew Registered Agent's Signature, if changing Registered Agent:	!		
hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete percept the obligations of my position as registered agent as propeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of <mark>n</mark> ovided for in Ch	ny duties, and I am fa Lapter 605, F.S. Or. ij	miliar with and this document is
•			

If Changing Registered Agent, Signature of New Registered Agent

H21000279855 3
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: Page 3 of 4

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Kenneth G. Bogard	: 186 18th Avenue	□Add
		Vero Beach, FL 32962	=Remove
		<u> </u>	☐C'hange
AMBR	Kenneth G. Bugard	186 18th Avenue	
	Vero Beach, FU 32962	□Remove	
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If amending any other information	n, enter cha	ngc(s) here: (	Attach additio	nal sheets, if no	ccessary.)		
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Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this ble document's effective date on the De	be specific and o ck does not m	cannot be prior to ect the applicab	date of filing or n le statutory filir	nore than 90 days a	ptional) flor filing.) Pursa this date will n	uant to 605.02 not be listed	07 (3 x) as the
the record specifies a delayed effective	date but not	an effective tim	e at 12 <del>:</del> 01 a.m.	on the earlier of	: (5) The 90th	i day after ti	ne
ord is filed.	water, true (	and officer to start			.,	,	
Dated 1/ 7-21 2021	,		·· :				
Dated 1/ 7-21 2021	G Bo	sember or authori	zed representativ	e of a member			
	-	Kenneth G.					
		Typed or printed	-				

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