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(Requestor's Name)
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(City/State/Zip/Phone #)
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(Business Entity Name)
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(Document Number)
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Tallahassee, FL 32314

TO:

TO: Registration : Division of Co							
Havoc Ju: SUBJECT:	nk Removal and Demolition LLG	c ·					
Name of Limited Liability Company							
The enclosed Articles o	of Amendment and fee(s) are sub	omitted for filing.					
Please return all corresp	oondence concerning this matter	to the following:					
	Michael Hughbanks						
		Name of Person					
		Firm/Company	<u> </u>				
	11800 Colony Lakes Blvd						
		Address					
	New Port Richey / Florida	34654					
	·	City/State and Zip Code					
	hughenov@hotmail.com	to be used for future annual report notif					
For further information	concerning this matter, please co	•	(Cantill)				
Michael Hughbanks		727 943-2384					
Name	of Person	at () Area Code Daytime	Telephone Number				
Enclosed is a check for	the following amount:						
■ \$25,00 Filing Fee	☐ \$30.00 Fiting 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 Addre		Street Address:					
Registration Section Division of Corporations		Registration Section Division of Corporations					
P.O. Box 6327		The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Havoc Junk Removal and Demolition 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 June 28, 2021 and assigned Florida document number L21000296379 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Havoc Junk Removal 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) 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

, Florida

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	Michael Hughbanks	11800 Colony Lakes Blvd	■Add
		New Port Richey	□Remove
		FL.34654	
MGR	Jeff Collins	11801 Colony Lakes Blvd	_
		New Port Richey	
		FL . 34654	_
			
			□Remove
			□ Change
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THE GATE HISCH	r than the date of filing: the date must be specific and cannot be d in this block does not meet the a te on the Department of State's re-	applicable statutory filmy remires	(optional)) days after filing.) Pursuant to 605,0207 ments, this date will not be listed as a
record specifies a dela d is filed.	red effective date, but not an effec	tive time, at 12:01 a.m. on the ear	lier of: (b) The 90th day after the
Dated	2021	·	
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Filing Fee: \$25.00