121000396585

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



500375370455

10/22/21--01017--003 **30.00



A. BUTLER NOV 0 5 2021

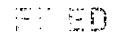
COVER LETTER

	Registration Se Division of Cor			• •	, , , , , , , , , , , , , , , , , , ,
	Bost Servic	es LLC	,		
SUBJEC	T:	Name of Lim	ited Liability Company	.	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing		
		ondence concerning this matter	-		
		Tyrone Bost			
			Name of Person		
		Bost Services LLC			
			Firm/Company	•	
		7643 Gate Parkway Suite 1			
			Address		
		Jacksonville FL 32256			
			City/State and Zip Code		
		Tyronebost@hotmail.com E-mail address: (to be used for future annua	l report notífica	tion)
For furth	er information c	oncerning this matter, please ca		•	
Tyrone I			917 29	936784	
	Name o	f Person	at () Area Code	Daytime To	elephone Number
Enclosed	l is a check for th	he following amount:			
☐ 52 5.	00 Filing Fee	S \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is co		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres		Street A		
	Registration 5 Division of C		_	ration Section on of Corpo	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



2021 OCT 22 AH 9:53

(<u>Name of the Limited Liability (</u> A Florida Li	Company as it now appears on our records.) amited Liability Company)	
The Articles of Organization for this Limited Liability Con	mpany were filed on 9/07/2021 and assigned	
Florida document number L21000396585	- -	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	ed liability company here:	
49		
The new name must be distinguishable and contain the words "Limited	ad Liability Company," the designation "LLC" or the abbreviation "L,L,C,"	
Enter new principal offices address, if applicable:	7643 Gate Parkway	
(Principal office address MUST BE A STREET ADDRES		
	Jacksonville FL 32256	
Enter new mailing address, if applicable:	7643 Gate Parkway	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 104-1323	
	Jacksonville FL 32256	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:	office address on our records, <u>enter the name of the new reg</u>	
New Registered Office Address: 7643 Gate	te Parkway, Suite 104-1323	
New Registered Office Address: 7643 Gate Jacksonvi	Enter Florida street address	

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:	81	
MGR = Manager AMBR = Authorized Member		
Title Name	Addroce	Type of Action

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			[]Change
			©Remove
			□Change
			□Add
			☐ Change
	<u> </u>		□ Add
			□Remove
		□Change	
		DAdd	
			□Remove
			□ a

ective o	date, if other than the date of filing: (optional)
reffectiv ter lfab	e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 to date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	s effective date on the Department of State's records.
cord spe	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
is filed.	
ted	·
	Signature of a member or authorized representative of a member
	Separatore of a member or authorized representative of a member
	Tyrone Bost
	Typed or printed name of signer

Filing Fee: \$25.00