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## **COVER LETTER**

	TRACTOR SERVICE LLC		
1:	Name of Lim	ited Liability Company	
osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
turn all correspo	ondence concerning this matter	to the following:	
	ANDREW J GAY		
		Name of Person	<del></del>
		Firm/Company	
	PO BOX 2053		
		Address	
	CHIEFLAND, FL 32644		
		City/State and Zip Code	
er information c			ottireation)
W J GAY		352 443-9597	
Name c	f Person	Area Code Dayt	ime Telephone Number
is a check for t	he following amount:		
00 Filing Fee	☐ \$30.00 Filing 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)
		<u>Street Address:</u> Registration S	
Division of C	Corporations	Division of C	orporations
			FTallahassee roe Street, Suite 810
	SHELLY'S T:  SHELLY'S To sed Articles of turn all correspondent all correspondent and the second sec	Name of Lin  nsed Articles of Amendment and fee(s) are subturn all correspondence concerning this matter  ANDREW J GAY  PO BOX 2053  CHIEFLAND, FL 32644  ANDYGAY H@YAHOO.9  E-mail address: (er information concerning this matter, please cells) W J GAY  Name of Person  is a check for the following amount:  00 Filing Fee  \$30.00 Filing Fee &	SHELLY'S TRACTOR SERVICE LLC  T: Name of Limited Liability Company  ased Articles of Amendment and feets) are submitted for filing.  turn all correspondence concerning this matter to the following:  ANDREW J GAY  Name of Person  Firm/Company  PO BOX 2053  Address  CHIEFLAND, Fl. 32644  City/State and Zip Code  ANDYGAY H@YAHOO.COM  E-mail address: (to be used for future annual report in the propertion of Corporations of Certificate of Status  OF Filing Fee Status Status Certified Copy (additional copy is enclosed)  Mailing Address: Registration Section Division of Corporations P.O. Box 6327  The Centre of

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHELLY'S TRACTOR SERVICE LLC		
( <u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears on our records.) inned Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number <u>L21000407325</u>	mpany were filed on 09/14/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d 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 ADDRE.	SS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	office address on our records, enter the na	me of the new registe
Name of New Registered Agent:		
New Registered Office Address:		==
tow isognicion without waters.	Enter Florida street address	4.
	, Florida	2
<del></del>	City	Zip 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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SHELLY M GAY	6095 SW 83RD PLACE	<b>=</b> Add
		TRENTON, FL 32693	□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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Filing Fee: \$25.00