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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co			
SUBJECT: Safe Site I	Damage Prevention, LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Dervon J. Gaskins, Sr.	Name of Person	
		ivanie of reison	
	Safe Site Damage Prevent	tion, LLC	
		Firm/Company	
	22 W. Colonial Drive, Ap	t. 3207	
		Address	
	Orlando, Florida 32801		
		City/State and Zip Code	
	djgaskins@outlook.com E-mail address: (to be used for future annual report notification)	
For further information o	concerning this matter, please c	all:	
Dervon J. Gaskins, Sr.		at (407) 989-7344	
Name o	f Person	Area Code Daytime Telephone Nu	ımber
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	00 Filing Fee, ificate of Statu ified Copy tional copy is enc
Mailing Addres		Street Address:	
Registration S Division of C		Registration Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

The Law Offices of Timothy K. Anderson TIMOTHY K. ANDERSON, ESQ.

480 Maplewood Drive, Suite 5 Jupiter, Florida 33458

Brent E. Carrington Title Agent/Closer

Lorraine A. Hinkle Legal Assistant

April 11, 2022

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

Re:

Articles of Amendment to Articles of Incorporation for changes to Safe Site Damage Prevention, LLC.

Dissociation or Resignation of Member, Manager from Florida or Foreign Limited Liability Company

Please find enclosed the executed original Articles of Amendment to Articles of Organization to Safe Site Damage Prevention, LLC and Dissociation or Resignation of Member, Manager from Florida or Foreign Limited Liability Company along with a Postal Money Order in the amount of \$50.00 to cover the filing fee for both documents.

Thank you for your assistance. If you have any questions, please do not hesitate to contact this office.

Very truly yours,

Lorraine Hinkle, Legal Assistant to

Timothy K. Anderson, Esq.

TKA/lh

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

2022 APR 15 PH 12: 02 Safe Site Damage Prevention, 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 February 15, 2022 Florida document number L22000060114 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: 33 W. Colonial Drive, Apt. 3207 (Principal office address MUST BE A STREET ADDRESS) Orlando, Florida 32801 Enter new mailing address, if applicable: 33 W. Colonial Drive, Apt. 3207 (Mailing address MAY BE A POST OFFICE BOX) Orlando, Florida 32801 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: Dervon J. Gaskins, Sr. New Registered Office Address: 33 W. Colonial Drive, Apt. 3207 Enter Florida street address Orlando , **Florida** 32801 Zip Code City

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 Changing Registered Agent, Signature of New Registered Agent

u 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	Blake Boyd	4209 Russell Street	
		Jupiter, Florida 33469	■Remove
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	· .		□Add
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			Remove
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an effective date	if other than the date of filing: (optional) 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
iote.	c discrete in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ocument's ener	ctive date on the Department of State's records.
record specifies I is filed.	s 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 med.	
-4- J	
ated	, 2022
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00