## L22000082428

(F	Requestor's Name)
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ALLAHASSEE FOR

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SECRETARY OF STATE BUTLER A. BUTLER

MAR 16 2022

## **COVER LETTER**

TO: Registration Section

Division of Corp	orations		
subject: <u>Blac'</u>	K Sheep Diesel Name of Lim	ited Liability Company	<del></del>
	Amendment and fee(s) are sub		
	Dennis	Johnson Jr. Name of Person	
	Black She	ep Diesel Co. LL	<u> </u>
	1908 Lake	Tosephine ar	4.07 \$ 4.7 \$
	Sebring, FL	33875	<del></del>
	Black Sheep Die	CSELCO Agmail Con to be used for future annual report not	) ification)
For further information ec	oncorning this matter, please co	all:	
Dennis Joh		at ( <u>8 v3</u> ) <u>253 -</u> Area Code Daytin	\899 ne Telephone Number
Enclosed is a check for th	e following amount:		
© \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	El S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address</u> Registration S Division of Co	ection	<u>Street Address:</u> Registration Sc Division of Co	
P.O. Box 632	•	The Centre of	Fallahassee
Tallahassee, F	L 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Black Sheep Die				
(Name of the Limited Liability Compa (A Florida Limited	ny <mark>as it now appears on or</mark> Liability Company)	<u>ir records.</u> )		
The Articles of Organization for this Limited Liability Company Florida document number <u>L2200082L428</u> .  This amendment is submitted to amend the following:	were filed on Feb	. 21,2022	and assigned	
A. If amending name, enter the new name of the limited liab	ility company haras			
Black Sheep Diesel Compare The new name must be distinguishable and contain the words "Limited Liabi	lity Colupany," the designat	ion "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:	n/A	o change		
(Principal office address MUST BE A STREET ADDRESS)				
			<del></del>	
Enter new mailing address, if applicable:	n/A; no (	Change		
(Mailing address MAY BE A POST OFFICE BOX)				
		<del></del>		
B. If amending the registered agent and/or registered office	address on our record	s, <u>enter the name</u>	of the new registered	
agent and/or the new registered office address here:				
Name of New Registered Agent:		<del></del>		
New Registered Office Address:	Enter Florida street address			
		 Florida		
	City	<del></del>	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	_			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my di provided for in Chapte	uties, and Lam fa er 605, F.S. Or, i	miliar with and tithis document is	

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
			□Add
			□Remove
			☐ Change
			ClAdd
			□Remove
			☐ Change
			□ Add
			□Change
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<del>lote:</del> If the dat	e inserted in th	iis block does	not meet the a	applicable statu	filing or more the	optio nan 90 days after juirements, this	o <b>nal)</b> filing ) Pursuant to 6 date will not be l	:05.0207 ( isted as t
ocument's effe	ective date on the	ne Departmen	t of State's re	cords.				
record specific Lis filed.	s a delayed eff	ective date, bu	it not an effec	tive time, at 42	:01 a.m. on th	e earlier of: (b)	The 90th day a	fter the
ated <u>3 · /b</u>	,-2022			·				
1	A Company	Signature	of a member o	or authorized repr	esentative of a	member		
	~	_		Johnson reprinted name of				

Filing Fee: \$25.00