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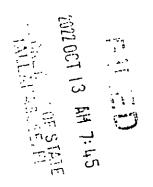
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: THE
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Office Use Only



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## **COVER LETTER**

Registration Section

**Division of Corporations** 

Tallahassee, FL 32314

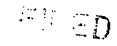
TO:

SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Stephen R Clark					
	Name of Person					
	CLARK TELEMATICS C	ONSULTING LLC				
		Firm/Company				
	13213 Pecky Cypress Driv	e				
		Address				
	Jacksonville, FL 32223					
		City/State and Zip Code				
	steveclark@clarktelematics	•				
	E-mail address: (	to be used for future annual report noti.	fication)			
For further information c	oncerning this matter, please c	all:				
Stephen Clark		904 237-5515 at ( )				
Name of Person		Area Code Daytime	c Telephone Number			
Enclosed is a check for the	ne following amount:					
■ \$25.00 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)			
Mailing Addres		Street Address:	ation.			
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



CLARK TELEMATICS CONSULTING LLC

2022 OCT 13 AM 7: 45

(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 March 07, 2022 and assigned 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: (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.

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 **Type of Action** Title Name Address -13213 Pecky Cypress Drive, Jacksonville, FL 32223 \_\_\_ **≣**Add Vin President of Sales Change 13213 PECKY CYPRESS DRIVE
TACKSONVILL, FL 32223 BAdd "MG R" Kathleen M Clark \_\_\_\_\_ Change \_\_\_\_\_ Change \_\_\_\_\_ □Change □Add \_\_\_\_\_ Change \_\_\_\_\_ \\_\_ \\_\_ \\_\_ \\_\_ \\_Add

\_\_\_\_\_ □Change

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e: If the date inserted in this b	lock does not meet tl	he applicable	e statutory filing	g requirements,	this date will not	t be listed as
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			d representative	of a number		
	<ul> <li>Signature of a member</li> </ul>	C) (7) (J)))(10)		COLUMN TERMINATEDRAL		

Filing Fee: \$25.00



September 16, 2022

STEPHEN R CLARK 13213 PECKY CYPRESS DRIVE JACKSONVILLE, FL 32223

SUBJECT: CLARK TELEMATICS CONSULTING LLC

Ref. Number: L22000116050

We have received your document for CLARK TELEMATICS CONSULTING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 122A00020634

