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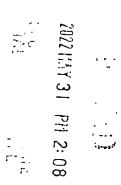
(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
<b>,</b> ,	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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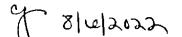
Office Use Only



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## ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION ... **OF** 

If Changing Registered Agent, Signature of New Registered Agent

2022 HAY 31 PH 2: 08

LEINBACH INDUSTRICS, LLC
(Name of the Lin

This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  LEINBACH INDUSTRIES, LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation of the new principal offices address, if applicable:	
A. If amending name, enter the new name of the limited liability company here: LEINBACH INDUSTRIES, LLC	on "L.L.C."
A. If amending name, enter the new name of the limited liability company here:  LEINBACH INDUSTRIES, LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation that the principal offices address, if applicable:	on "L.L.C."
LEINBACH INDUSTRIES, LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation of the new principal offices address, if applicable:	on "L.L.C."
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation that the principal offices address, if applicable:	fon "L.L.C."
Enter new principal offices address, if applicable:	ion "L.L.C."
(Principal office address MUST BE A STREET ADDRESS)	
<del></del>	
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 agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	e new registere
Enter Florida street address	
, Florida	
•	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 a provisions of all statutes relative to the proper and complete performance of my duties, and I am familia accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this being filed to merely reflect a change in the registered office address, I hereby confirm that the limited he company has been notified in writing of this change.	ir with and document is

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
			□Remove
			□Change
			Remove
			Change
			□Add
			□Remove
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ective date, if other than the effective date is listed, the date m	e date of filing:			(optional)	
te: If the date inserted in this t	block does not meet the	e applicable statuti	ling or more than 90 ory-filing requiren	days after filing.) Pursu ients, this date will n	ant to 605.020 ot be listed a
rument's effective date on the l	Department of State's r	records.			
cord specifies a delayed effecti	ve date (but not an effi	ective time, at 12:0	Ham on the earl	ier of: (b) The 90th	day after the
s filed.	Te date, but not an ent	enve time, at 12%	yr willi on the eur	101 017 (0)	day direct time
May 25	2023	<u>)</u>			
ed May 25	,	•			
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Filing Fee: \$25.00