## 2000286436

(Re	questor's Name)	
(Ad	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

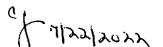


200391299682

07/22/22--01009--008 \*\*80.00

RECEIVED

2022 JUL 22 PH I2: 03

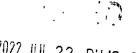


## **COVER LETTER**

	tration Sec on of Corp			
	's Crane'n S	Service, LLC		
SUBJECT:		Name of Lim	ited Liability Company	<del></del>
The enclosed A	articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return a	il correspon	idence concerning this matter	to the following:	
		Crystal Lynn Johnson		
			Name of Person	·
		D's Crane'n Service		
			Firm/Company	<del></del>
		2422 Standfast Ln		
		-	Address	<del></del>
		Marianna, Fl 32446		
			City/State and Zip Code	
		dscranenservice@gmail.com		
		E-mail address: (	to be used for future annual repo	rt notification)
For further infe	rmation co	ncerning this matter, please c	all:	
Crystal Lynn J	ohnson		850 557-38	13
	Name of	Person		aytime Telephone Number
Enclosed is a c	heck for the	c following amount:		
□ \$25.00 Fil	ing 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)
	ng Address		Street Addre	
_	stration S sion of Co	ection orporations	Registratio Division of	Corporations
	Box 6327	•	The Centre	of Tallahassee
Talla	hassee, F	L 32314	2415 N. M	onroe Street, Suite 810

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 JUL 22 PH 12: 03

D's Crane'n Service, LLC			• • •
(Name of the Lim	ited Liability Compa (A Florida Limited )	ny as it now appears on our record Liability Company)	ALTALIA FEFT
The Articles of Organization for this Limited I	iability Company	were filed on June 24, 2022	and assigned
Florida document number 1.22000286436	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, <u>enter the new name o</u>	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	2422 Standfast Ln	4.1.*
(Principal office address MUST BE A STREET ADDRESS)		Marianna, Fl 32446	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>: BOX)</u>	2422 Standfast Ln Marianna, Fl 32446	
B. If amending the registered agent and/or agent and/or the new registered office address.		address on our records, <u>enter</u>	the name of the new registere
Name of New Registered Agent:	Crystal Lynn Jo	ohnson	
New Registered Office Address:	2422 Standfast	l.n	
	· · · · · · · · · · · · · · · · · · ·	Enter Florida street addres	<u> </u>
	Marianna		orida 32446
		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.

Changing Registered Agent, Senature 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
MGR	Crystal Lynn Johnson	2422 Standfast Ln	⊟Add
		Marianna, Fl 32446	□Remove
MGR	Ricky Daniel Foster	4571 Bellamy Bridge Rd	
		Marianna, Fl 32446	≅Remove
			□∧dd
			□Remove
			[] Change
			□Remove
			Change
			□Add
			□Change
			□Add
		-2	□ Remove
			□Chanee

	- <del>-</del>
- 1	
<del>,</del>	
	<u>-</u>
-	
<u> </u>	
fective date, i	if other than the date of filing: (optional)
<u>ote:</u> If the date	is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
cument's effec	tive date on the Department of State's records.
proof specifies	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 filed.	a deligion effective date, the first the effective time, in 1210, 2110, 61110 61110 61110 61110 61110
	2.1.2
acd July	y the water

•

Filing Fee: \$25.00