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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
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COVER LETTER*

Division of Corp	orations		
subject: <u>FW</u>)	Uste Dut TRAI Name of Limit	ISOUTATION LLC led Liability Company	<u></u>
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
	Sha	Name of Person	
	Fur Nite Du	+ TRANSTICHATON	LLC
	4513 Count	ey Hills Blud Address	
	Plant City,	FL 33563 City/State and Zip Code Fyline@amail.com obsused for future annual report notific	·
			ration)
For further information co	ncerning this matter, please ca	11;	
Armand He Name of	r (10lur) Person	at (<u>\$13</u>) <u>5 j to - G</u> Area Code Daytime	015 Telephone Number
Enclosed is a check for the	e 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 Address:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street. Suite 810
Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FUN NITE DUT TRANS (Name of the Limited Liability Co) (A Florida Limited Limi	mpany as it now appears on ted Liability Company)	our records.)
The Articles of Organization for this Limited Liability Compa Florida document number <u>LAAD(X)347956</u> .	any were filed on Nove	mber 8世 <u>3023</u> and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation	ation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDRESS	2	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our record	ds, enter the name of the new registered
Name of New Registered Agent:	Shannon Br	ladbey-
New Registered Office Address:	Enter Florida st	reet address
		, Florida
	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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	Armand Herndun	4513 Country Hills Blvd	□Add
		Plant City FL 33563	🗹 Remove
			□Change
MGR	Armand Heendan	4513 Courtey Hills Blud	🗹 🗖 Add
		Plant City, FL 33563	□Remove
			Change
AMBR Shannon Bea	Shannon Bradley	4513 Courtey Hills Bird	t\(\frac{1}{2}\)Add
		Plant City, FL 33563	□Remove
			Change
			□Add
		-	□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

For, Clarity of Confirmation, Shannon Brace "the owner" and Armond, is just a "man	and! Pra
the company.	
	
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	<u> </u>
	SE CHANGE
	9: FTA: 0
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If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days a Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of d is filed,	: (b) The 90th day after the
Dated November Sty 2082 . 2082 .	
Signature of a member or authorized representative of a member	
A 222 / 11 - 224 2	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fun Nite Dist TR	hility Company as it now appears on orda Limited Liability Company)	Cour records)
(Name of the Limited Lia (A Flo	orida Limited Liability Company)	<u> </u>
The Articles of Organization for this Limited Liability	y Company were filed on Nove	ember 8±9033 and assigned
Florida document number <u>L220(03/11950</u>	2	
This amendment is submitted to amend the following	;:	
A. If amending name, <u>enter the new name of the l</u>	limited liability company here:	
The new name must be distinguishable and contain the words	Limited Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office address on our reco e:	rds, enter the name of the new registered
Name of New Registered Agent:	Shannon R	radley-
New Registered Office Address:	Enter Florida	street address
		, Florida
	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.

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>	<u>Name</u>	Address	Type of Action
AMBC	Armand Herrydun	4513 Country Hills Blud	□Add
		Plant City: FL 33563	Remove
			□Change
MER.	Armand Herndun	4513 Courtey Hills Bird	īZAdd
		Plant Chy. FL 33543	□Remove
			□Change
AMBR Structure Bradiey	Shunon Bradley	4513 Country Hills Blud	⊠∧dd
		Plant CHy, FL 33563	Remove
			□Change
			🗆 Add
			□Remove
			□Change
***********			🗆 🛆 dd
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change

	For, Clarity 4 confirmation, Strannon Bradbey, is "the owner" and Annywa, is just a "manager" fixe. The company.
	tibe conservat
	THE CONTRACTOR
	<u> </u>
(If an e Note	ffective date, if other than the date of filing:
the rece	ord 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 filed.
Date	November 8th <u>3000</u> . <u>2000</u> .
	Signature of a member or authorized representative of a member
	Armand Herodon