## 122000417074

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SUBJECT: <u>EME</u>	yeary Wildlike	Selvices LLC ited Liability Company	(Add 144)	
4	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:		
	Danie	Benting Name of Person		
		Wildlife Services Firm/Company	LLC	
	4436 58	Bulett Ave	······································	2(
	Strat	FL 34997	FALL ALL	01 AGN 2202
	<u>dunel ac</u> E-mail address: (	City/State and Zip Code  McV4ncfwildlike, Co to be used for future annual report noti	<u> </u>	<u>취</u> 양:
For further information c	oncerning this matter, please ca	all:	·- : :	6,1
Danel	Banting	at ( <u>57.1</u> ) <u>204 –</u> Area Code Daytim	3/67	
Name o	f Person	Area Code Daytim	e 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 enclose	
Mailing Address Registration	Section	Street Address: Registration Se		
Division of C P.O. Box 632	=	Division of Cor The Centre of T		
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

Registration Section Division of Corporations

TO:

ARTICOLO OL AMENDMENT

## TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability C. (A Florida Lin	ompany as it now appears on our records.) ited Liability Company)	·		
The Articles of Organization for this Limited Liability Com Florida document number <u>L Z Z O O O 4 I 7 O 7 4</u> .	oany were filed on <u>69/26/22</u>	a	and assi	ignec
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 a	bbrevia	tion "L.l	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRES	5)			
Enter new mailing address, if applicable:		SECRE	2022 N	
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	• ਹੈ <u>ਬਾਹੜਾ</u>
		<u> </u>	0	· •
	:	11 <sup>-1</sup>	111	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ice address on our records, <u>enter the nar</u>	ne of t	he new	<u>/ regis</u>
Name of New Registered Agent:			···-	
New Registered Office Address:	Enter FJorida street address	<del></del>		
	, 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 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

	Manager - Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Act
VP_	Elizabeth Banting	4436 St Beckett Ave Strapt, FL 34997	jX/\dd
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or removed from our records:

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 Tecti	ve date, if oth	er than the date (	of filing: $\hat{O}^{a}$	9/76/	122	(option	nal)	
ote: ocume	If the date inserent's effective d	ted in this block doo late on the Departm	es not meet the ent of State's re	applicable st cords.	atutory filing r	than 90 days after fi equirements, this o	lling.) Purst date will n	ot be lis
record Lis filo		ayed effective date.	but not an effec	tive time, at	12:01 a.m. on	the earlier of: (b)	The 90th	day afte
ated	Novembe	v 7	<u>Zo t</u>	27.				
_		170						
_								
-		Signati	ire of a member o	r authorized r	epresentative of	a member		