

h22000442344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

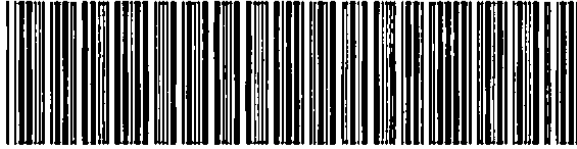
(Business Entity Name)

(Document Number)

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10/27/22--91917--003 \*\*25.00

2022 OCT 27 PM 1:55  
FESTIVE  
CITY

JAN 4 4 11

Registration Section  
Division of Corporations

EFFECT: CANALCO LLC  
Name of Limited Liability Company

closed Articles of Amendment and fee(s) are submitted for filing.

return all correspondence concerning this matter to the following:

WILLIAM CANAL  
Name of Person

CANALSCO SVC LLC  
Firm/Company

2797 TURF SHOES DRIVE  
Address

FERNANDINA BEACH, FL 32034  
City/State and Zip Code

BARBARA CANAL @ HOTMAIL.COM  
E-mail address: (to be used for future annual report notification)

Further information concerning this matter, please call:

WILLIAM CANAL at (904) 415 0733  
Name of Person Area Code Daytime Telephone Number

used is a check for the 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:**

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

TO  
ARTICLES OF ORGANIZATION  
OF

CANALCO LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2022 OCT 27 PM 1:55

Articles of Organization for this Limited Liability Company were filed on OCTOBER 13, 2022 and assigned a document number L22 000 442344

Amendment is submitted to amend the following:

Amending name, enter the new name of the limited liability company here:

CANALSCO SVC LLC

New name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

New principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS

New mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

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

Florida

City

Zip Code

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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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**  
**R = Authorized Member**

**R = Authorized Member**

<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
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Adding any other information, enter change(s) here: (Attach additional sheets, if necessary.)

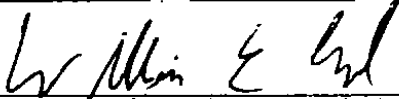
Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

If an effective 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 605.0207 (3)(b)

g: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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:  
the 90th day after the record is filed.

dated Oct 25, 2022



Signature of a member or authorized representative of a member

WILLIAM E CANAL

Typed or printed name of signee