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(Requestor's Name)	
(Address)	
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COVER LETTER

	Registration So Division of Co				
C140 1177		MPSTER LLC			
SUBJEC	.l:	Name of Lim	ited Liability Company		
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		ЛМ GAY			
			Name of Person		
		ЛМ GAY СРА			
			Firm/Company		
		3984 MANATEE AVE E			
			Address		
		BRADENTON, FL 34208			
			City/State and Zip Code		
		OFFICE@JIMGAYCPA.C	OM to be used for future annual:	report notification)	
For furthe	er information c	concerning this matter, please c		•	
JIM GAY	(941 747 at ()	7-0588	
	Name o	of Person	Area Code	Daytime Telephone Number	
Enclosed	is a check for the	he following amount:			
□ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc	Certificate of Status	
	Mailing Addres Registration S		<u>Street Ac</u> Registra	ddress: ntion Section	
	Division of C		Division	n of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 NO!! -2 MIII: 22

J & D DUMPSTER LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on OCTOBER 25, 2022 and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: J & B DUMPSTER, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 new register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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 ac or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JARED MCGREGOR	5026 241ST STREET E	■Add
		MYAKKA CITY, FL 34251	□Remove
			□Change
			□Add
			□Remove
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ffective date, if other than the dan effective date is listed, the date must be tote: If the date inserted in this bloc ocument's effective date on the Dep	e specific and cannot be pri- k does not meet the appl	or to date of filing icable statutory	or more than 90 days after	i onal) r filing.) Pursuant to 605 is date will not be liste	:0207 ed as
record specifies a delayed effective of its filed.	date, but not an effective	time, at 12:01 a	m. on the earlier of: (b	o) The 90th day after	r the
ated OCTOBER 31	. 2022	·			
	nature of a member or au	thornal sar	tive of a member		

Filing Fee: \$25.00