L2200483203

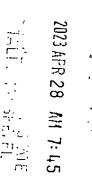
(Requestor's Name)
(Address)
(Address)
(/ ladicss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified dopies Certificates of Status
Special Instructions to Filing Officer:

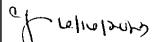
Office Use Only



800407377618

54.25va.--1.1014--66a ••05.30





COVER LETTER

TO: Registration Se Division of Cor			
subject:	lart Solid We Name of Lim	eldS LLC ited Liability Company	
	Amendment and fee(s) are sub		
Please return all correspo	ondence concerning this matter	to the following:	
	Dal-	Hon Hav-	
	Hart Sol	id Welds, LLC Firm-Company	<u></u>
	1669 NE	158 th St. Address	_
	_ Starke	,F1. 32091	
	datten E-mail address: (1	City/State and Zip Code hav - 24 @ amo to be used for future annual report not	ification)
For further information c	oncerning this matter, please co	all;	
Dalte	n Hart	at (964), 263~ Area Code Daytin	3425 ne Telephone Number
		, , , , , , , , , , , , , , , , , , ,	
Enclosed is a check for th	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 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Hart-Solid Welds	LLC	2023 A	PR 28 AM 7: 45
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	(ny as it now appear: Liability Company)	s on our records.) EUR	 [] ₁ ,
The Articles of Organization for this Limited Liability Company Florida document number 12200183	were filed on	11/10/2022	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company." the de	esignation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	4809 Star	SE 109th Ke, Fl. 3	25t.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4809 Star	SE 109°	nst 2091
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our re	cords, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Post Pl	da street address	
	Enter Flori		
	Circ	, Florida	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 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 Title <u>Name</u> **Address** Type of Action □ Change Dalton Hart ______ LI Remove ____
Remove _____ □Add _____ LJRemove ___ □Remove

_____ □Change

_	
	
	•
	
(If an effective date Note: If the date	, if other than the date of filing:
aocument s eric	ective date on the Department of State's records
f the record specific ecord is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	4/24,2003.
	Signature of a member or authorized representative of a member