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## **COVER LETTER**

Division of Cor					
SUBJECT:	nderson Islan	d Solutions L ited Liability Company	LC		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
		Anderson Name of Person			
	<u> </u>	n Island Solution	ons llc		
	12401	HARRY ST.			
		City/State and Zip Code  Merson Laol. Com to be used for future annual report not	2022 B 2 C 27		
	Mattda	nderson Daol.com	<b>)</b>		
	E-mail address: (	to be used for future annual report not	fication)		
For further information e	oncerning this matter, please c	all:	, <u></u>		
Matt	Anderson	at (235) 32	2-0881		
Name o	f Person	Area Code Daytin	e Telephone Number		
Enclosed is a check for the	he following amount:				
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres Registration		<u>Street Address:</u> Registration Sc	ection		
Division of Corporations		Division of Corporations The Centre of Tallahassee			
P.O. Box 632 Tallahassee,			oe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Anderson Isl	land g	polutions	LLC				
(Name of the Limited Liz (A Flo	ability Compa orida Limited I	ny as it now appe Jability Company	ars on our ree	ords.)			
The Articles of Organization for this Limited Liability Florida document number <u>L220004960</u>	ty Company 7 <u>6</u> .	were filed on _	11/21	12026	<u> </u>	d assigno	ed
This amendment is submitted to amend the following	<b>ā</b> ;						
A. If amending name, enter the new name of the $N/A$	<u>limited liab</u>	ility company	<u>here</u> :				
The new name must be distinguishable and contain the words	Limited Liabi	lity Company," the	designation "I	.LC" or the a	bbreviatio	on "L.L.C.	•••
Enter new principal offices address, if applicable:	:	N/F	<u> </u>				
(Principal office address MUST BE A STREET ADDRESS)						2 <u>99</u> 2	
Enter new mailing address, if applicable:						2 DEC 27	* *
(Mailing address MAY BE A POST OFFICE BOX)						 	
				<u></u>	·- , ,	<u>ः' —</u>	
B. If amending the registered agent and/or regist agent and/or the new registered office address he	<u>re</u> :					e new re	gistered
Name of New Registered Agent:	MATT,	HEW O. HARRY	ANDE	FRSON	)		
New Registered Office Address:	<u> 12401</u>	HAKKY	STRE	<u> </u>			
	BOKE	Enter F.	lorida street ad		330	122	
		City			zip (	STRIE:	

## 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

<del>Tide</del> MGL	Name Matthew P. Anderson	Address 12401 HARRY ST. Bokeelia FL. 33922	Type of Action
			_ □Remove
			_ □Change
			_ 🗆 Add
			_ □Remove
			_ Change
			→ Signal Agreements.
		•	□ □ Change
			_ □Remove
			Change
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			[] Change
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			Change

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				27
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			<u>.`-</u>	
Tective date, if other than the date of fan effective date is listed, the date must be specificate: If the date inserted in this block does recument's effective date on the Department	not meet the applicable statut	(op- ling or more than 90 days aft	t <b>ional)</b> er tiling.) Pursua nis date will no	int to 605.02 it be listed
record specifies a delayed effective date, but is filed.	it not an effective time, at 12:	01 a.m. on the earlier of:	(b) The 90th	day after th
$\frac{12/15/22}{}$				
4. /	Onde of a member or authorized repre			

Filing Fee: \$25.00