## L22000 S13661

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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FILED  85.023 SEP 15 AM 8: 38  SECRETARY OF STATE  11 THANSTE, FI Open:

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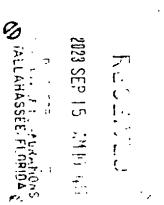
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## **COVER LETTER**

TO:	Registration Se Division of Cor		
CUDIE	. com	EXCELLE	ENT EQUIPMENT, LLC
SUBJE	.C1:	Name of Lim	nited Liability Company
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.
Please	return all correspo	ndence concerning this matter	to the following:
		STACY SMALL	
		<del> </del>	Name of Person
		SMITH THOMPSON SH.	AW
		-	Firm/Company
		3520 THOMASVILLE RO	OAD - 4TH FLOOR
		<del></del>	Address
		TALLAHASSEE, FL 323	09
			City/State and Zip Code
		excellentequipmentllc@gm	
r., e.,	.h		(to be used for future annual report notification)
		oncerning this matter, please c	
STAC	Y SMALL		850 893-4105 at ()
	Name o	f Person	Area Code Daytime Telephone Number
Enclose	ed is a check for th	ne following amount:	
<b>■</b> \$23	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	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 OF

2023 SEP 15 AM 8:38

EXCELLENT EQUIPMENT, LLC

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

<b></b>		12/04/2022	
The Articles of Organization for this Limited Lia	bility Company were filed or	n	and assigned
Florida document number L22000513661	,		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability compan	ny here;	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company,"	the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u></u> Ολ)		
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office address on or here:	ur records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter	Florida street address	
		Florida	
	City	, Florida _	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:		
I hereby accept the appointment as registered	agent and agree to act in t	his canacity. I further a	gree to comply with the

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

<u>Title</u>	Name	Address	Type of Action
MGR	LISA C. GREEN	5660 BRADFORDVILLE ROAD	■Add
		TALLAHASSEE, FL 32309	□Remove
			□Change
MGR	WILLIAM H. GREEN	5660 BRADFORDVILLE ROAD	□Adđ
		TALLAHASSEE, FL 32309	□Remove
		10.1	= Change
			□Add
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Effect If an eff	ive date, if other than the date of filing: (optional) ective 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 (
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
docum	ent's effective date on the Department of State's records.
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	September 1 2023
	W. Harris effece
	n. Harris office
	Signature of a member or authorized representative of a member
	WILLIAM GREEN, MANAGER
	Typed or printed name of signee

Filing Fee: \$25.00