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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

: (307)200-2803

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please:

| VI | Second | Commonwealth | Commo

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DMD MAINTENANCE SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability	tu Company wars filed on 02/06/2020	and assigned
	ty Company were ried on	and assigned
Florida document number L23000065958	·	
This amendment is submitted to amend the following	<u>;</u> :	
A. If amending name, enter the new name of the	limited liability company here:	
MD Maintenance & Transport LLC		
The new name must be distinguishable and contain the words."	'Limited Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	•	2024F
• • •		
(Principal office address MUST BE A STREET ADDRESS)		
		12 1 -
		EM S = OF MI
		HAY OF S
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX		EM S = OF MI

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

Cav

7901 4th St N STE 300

St. Petersburg

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

_, Florida <u>33702</u> Zip Code 2/9/2024 10:15:51 PST

To: 18506176383

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From: Registered Agents Inc.

Fax: 8134365206

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	STOLL, MARCUS	814 W MILLER ST	□ Add
		ORLANDO, FL 32805	☑Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			☐ Change
	,		F1Add
			□Remove
			[] Change
			□Add
			□Remove
			☐Change
			CJAdd
			□Remove
			 (1)

Typed or printed name of signee

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From: Registered Agents Inc.

Fax: 8134365206

2/9/2024 10:15:51 P\$T

To: 18506176383

Robin Jones