## 6230000081674

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## **COVER LETTER**

'то:	Registration S Division of Co		r.		
SUBJEC		& Tool LLC			
SUBJEC	<u></u>	Name of Lim	ited Liability Company		-
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		Chase Heffin			
			Name of Person	<b>5</b>	
		Dan's Saw & Tool LLC			
			Firm/Company		_ _ _
		5511 S. Orange Ave			1.
			Address		ه. مسمو مسمو مسمو
		Orlando, FL 32809			ن.) ت
		——————————————————————————————————————	Cirulent and W. C. 1.		_
		danssawandtool@gmail.cor	City/State and Zip Code		
		<del></del>	to be used for future annual re	port notification)	-
For furth	er information o	concerning this matter, please ea	all:		
Chase H	eflin			7264	
	Name o	of Person	at () Area Code	Daytime Telephone Numb	eer
Enclosed	l is a check for t	he following amount:			
□ \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclo	sed) Certific	Filing Fee, cate of Status & cd Copy (all copy is enclosed)
	Mailing Addres		Street Ado		
	Registration : Division of C			ion Section of Corporations	
	P.O. Box 632			re of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dan's Saw & Tool 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 4/01/2023 \_\_\_\_\_ and assigned Florida document number L23000081674 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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

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Filing Fee: \$25.00

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	6/12/2023	
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s filed.		
6/12	2023	
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ed	Chase Heflin	

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Filing Fee: \$25.00