L23000158074

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2023 NOV 13 MH 10: 00

COVER LETTER .

TO: Registration S		,	· ·	•
Division of Co	orporations		•	
SOUTHE. SUBJECT:	AST CONSERVATION SERV	ICES, LLC		
	Name of Lin	nited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	JOSEPH LUYCX			
		Name of Person		•
	SOUTHEAST CONSERV	ATION SERVICES, LLC		
		Firm/Company		
	1025 W MADISON ST			
		Address		702 SE
	STARKE, FL 32091			340
		City/State and Zip Code		
	JOE@SECONSERVATION	N.SERVICES to be used for future annual report notifies		
For further information	concerning this matter, please c		ation)	SECURENCE PERMISSION OF SECURE
JOSEPH LUYCX		904 544-0885 at ()		" ō
Name (of Person		elephone Number	······································
Enclosed is a check for t	the following amount:			
■ S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy radditional copy is enclosed:	Certified	e of Status &
<u>Mailing Addre</u> Registration	Section	Street Address: Registration Section		
Division of C P.O. Box 632		Division of Corpo The Centre of Tal		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SouthEast Conservation Services 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 Cor	npany were filed on MARCH	29. 2023 and assigned
Florida document number L23000158074		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designat	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u></u>	
		2023 NOV
		76 3
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		
	-	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records	, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et address
	Cuy	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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JAMES MILLER	1025 W MADISON ST	□Add
		STARKE, FL 32091	■ Remove
			□ Change
			□Add
			□Remove
			□Change
			Remove
			SE DEfiange
	<u></u>		□Add
			□Remove
			□ Change
			□Remove

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