

L23000175115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

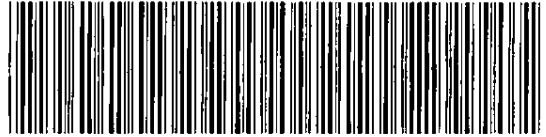
(Business Entity Name)

(Document Number)

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2023 JUL 13 AM 7:26
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SKC Industries, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Collins
Name of Person

SKC Industries
Firm/Company

148 Shelby Dr.
Address

Crawfordville, FL 32327
City/State and Zip Code

SKCollins80@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Collins at (813) 624-8739
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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**

SKC Industries LLC

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

1023 JUL 13 AM 7:25

The Articles of Organization for this Limited Liability Company were filed on April 10, 2023 and assigned Florida document number L23000175115.

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:

Lisa Collins

New Registered Office Address:

Enter Florida street address

Florida

City

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.

Lisa Collins

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
or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Shawn Collins	148 Shelby Drive	<input checked="" type="checkbox"/> Add
		Crawfordville, FL 32327	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Lisa Collins	148 Shelby Drive	<input type="checkbox"/> Add
		Crawfordville, FL 32327	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated July 11, 2023
Lisa Collins / Shawn Collins
 Signature of a member or authorized representative of a member
LISA Collins / Shawn Collins
 Typed or printed name of signee