L23000240063

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COVER LETTER

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TO: Registration Section Division of Corporations

SUBJECT: METZ SURVEYING LLC Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

Certificate of Status

S55.00 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

LLC (Name of the Limited Liability Company (A Plotted Limited Li	y as it now appear ability Company)	y on our records.)
The Articles of Organization for this Limited Liability Company v Florida document number 23000240063		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabil</u>	<u>ity company h</u>	<u>re</u> :
$\frac{METZ}{5CRVEY}$	LLC	
The new name must be distinguishable and contain the words "Limited Liabili	y Company, the c	esignation LLC, of the appreviation L.C.C.
Enter new principal offices address, if applicable:	SAME	15 ON RECORD
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>	<u>58ME</u>	AS ON RECORD
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	 ddress on our i	ecords, <u>enter the name of the new registered</u>
Name of New Registered Agent:		
New Registered Office Address:	·	
	Enter Flo	rida street address
	····	, Florida Zin Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
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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 familian 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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If a'mending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

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Title	Name	Address	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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 Effective date, if other than the date of filing:
If the record 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 record is filed.
Dated <u>MAY 23</u> , <u>7</u>
Signature of a member of authorized representative of a member
JAMES METZ

Typed or printed name of signee

Filing Fee: \$25.00

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