To: 18506176383 From: 15615153904 Date: 06/30/23 Time: 2:46 PM Page: 01/05

# Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000230958 3)))



H230002309583ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAW OFFICE OF PAUL A. KRASKER P.A.

Account Number : 120090000078 Phone : (561)801-7312 Fax Number : (561)515-3904

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

Email Address: Admin Quasmirvilledalic com

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

#### USA INDUSTRIAL PARK, LLC

And agreed the commentance was when a magnificer and defendent	A BY CANADA CONTROL PRODUCTION AND CONTROL P.
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JUL 05 2023 K. Brumblay To: 18506176383 From: 15615153904 Date: 06/30/23 Time: 2:46 PM Page: 02/05

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#### COVER LETTER

TO:

Registration Section

Divisi	ion of Corp	orations		
SUBJECT.	SA INDUS	STRIAL PARK, LLC		
SUBJECT: _		Name of Lir	nited Liability Company	
The anclosed A	Articles of A	Amendment and fee(s) are sub	unitted for filing.	
Please return a.	II correspon	idence concerning this matter	to the following:	
		PAUL A. KRASKER, ES	Q.	
			Name of Person	
		THE LAW OFFICE OF P	AUL A. KRASKFR, P.A.	
			Firm/Company	
		1615 FORUM PLACE, 57	TH FLOOR	
	Address		· · · · · · · · · · · · · · · · · · ·	
		WEST PALM BEACH, F	L 33401	
			City/State and Zip Code	
		Admin@USAMulehlic.com	to be used for future annual report i	Milliostian)
For further info	rmation co	ncorning this matter, please e		
Andrea Murphy	y Snowden		561 515-4722	
	Name of	Person	at () Area Code Days	time Telephone Number
Enclosed is a ci	neek for the	following amount:		
<b>≅</b> \$25 00 Fili	ng Fee	(1) \$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)
	ig Address: tration Se		<u>Street Address:</u> Registration S	
Divis		rporations	Division of C	orporations
_	nassee. Fl		The Centre of 2415 N. Mon	t Tallahassee roe Street, Suite 810

Tallahassee, FL 32303

H23000230958 3

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

USA INDUSTRIAL PARK, LLC		
(Name of the Lin	nited Liability Company as it now appears on our recor (A Florida Lumited Liability Company)	<u>'ds.</u> )
The Articles of Organization for this Limited Florida document number L23000271064	Liability Company were filed on JUNE 6, 2023	and assigned
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company here:	
	words "Eimited Liability Company," the designation "LE	C" or the abbreviation "L.L.C."
Inter new principal offices address, if appl		
Principal office address MUST BE A STRE	ET ADDRESS)	
	· -	
Enter new mailing address, if applicable:	***	· · · · · · · · · · · · · · · · · · ·
Mailing address MAY BE A POST OFFICE	E BOX)	
3. If amending the registered agent and/or	registered office address on our records, enter	the name of the new register
gent and/or the new registered office addr-	ess here:	: 2
		<b>23</b>
Name of New Registered Agent:	The Law Office of Paul A. Krasker, P.A.	
New Registered Office Address:	1615 Forum Place, 5th Floor	<u> </u>
	Enter Florida street addre	r - Ho - BB
	West Palm Beach	lorida 33 miles
	City	Zip-Code**

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.

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

If Changing Registered Agent, Signature of New Registered Agent

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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	LULFS, BRIAN	16575 GATOR ROAD	□Add
		FT. MYERS, FL 33912	□Remove
			<b>≅</b> Change
			FJ∧∂d
			DRemove
			□Change
			OAdd
		***************************************	□Remove
	The state of the s		
			□Remove
<u></u>			DAdd
			□Remove
			ElChange
			Remove
			□Change

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- To: 18506176383 From: 15615153904 Date: 06/30/23 Time: 2:46 PM Page: 05/05

# H723 >>> 723C9533

TO CHAMILLAND THE STATE OF THE	O APPOINT UNKNOWN INDIVIDUALS AS MANAGERS IN AN ATTEMPT
TO DEFRAUD OTHERS. TH	ERE IS NO RELATIONSHE WITH ANY PARTIES OTHER THAN BRIAN
LULES AND PHILIP DESTA	VEN, JR., ALL UNKNOWN PARTIES WHO HAVE ATTEMPTED TO CHANGE
THE LISTED MANAGERS H	AVE NO INTEREST IN THE LLC AND SHOULD NOT BE RECOGNIZED.
ONLY BRIAN LULFS AND F	PHILIP DESTAVEN, JR. ARE AUTHORIZED TO ACT ON BEHALF OF
THIS COMPANY.	
Tective date, if other than the dan effective date is listed, the date must be offer. If the date inserted in this blocomment's effective date on the Dep	ate of filing:
record specifies a delayed effective of is filed.	date, but not an effective time, at 12:01 a.m., on the earlier of: (b). The 90th day after
JUNE 28	2023
areu	

1123000 2369583 Filing Fee: \$25.00