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September 22, 2018

BETH SIMON 3409 KILMARNOCK DR APOPKA, FL 32712

SUBJECT: SIMON, KELVINGTON AND SHEALY, LLC

Ref. Number: L08000111715

We have received your document for SIMON, KELVINGTON AND SHEALY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist III

ムル・コレベル

www.sunbiz.org

COVER LETTER

TO:	Registration Sec Division of Corp		
e#0.107	or. Simo	on. Kelvington and Shealy, LLC	
SUBJEA	<u></u>	on, Kelvington and Shealy, LLC Name of Limited Liability Company	
The encl	losed Articles of A	Amendment and fee(s) are submitted for filing.	
Please re	eturn all correspor	ondence concerning this matter to the following:	
		Geth Simon	
		Name of Person	
		Simon, Kelvington and Shealy, LLC Firm/Company	
		2700 Westhall Lane, Ste 132	
		Nutress	
		Mailland, FL 32751	
		City/State and Zip Code	
		be the SKS flovida com E-mail address: (to be used for future annual report notification)	
		E-mail address: (to be used for future annual report notification)	
For furt	her information co	concerning this matter, please call:	
ı	Beth Sin	mon at (407) 697 4815 of Person Area Code Daytime Telephone Number	
		of Person Area Code Daytime Telephone Number	
Enclose	d is a check for th	he following amount: Received previously. See attached.	
□ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status	itus &

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Simon,	Kelving	ton and S	shealy. Ll	C		
(Name of the Limited Lia (A Flo	ibility Company orida Limited Lia	as it now appears (bility Company)	on our <u>records.</u>)	<u> </u>		
The Articles of Organization for this Limited Liabilit Florida document number <u>レの多のの日11フ15</u>		ere filed on	2-05-2	<u>00%</u> ,	ind assigned	l
This amendment is submitted to amend the following	g:					
A. If amending name, enter the new name of the	<u>limited liabili</u>	ty company here	<u>:</u> ;			
Simon Kelvington,	FFC					
The new name must be distinguishable and contain the words	Limited Liability				tion "L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET AL		2100 N Ste 137	resthall	Lane		
типери прис чинем жел			id, FL	32751		
Enter new mailing address, if applicable:		09				
(Mailing address MAY BE A POST OFFICE BOX	2					
B. If amending the registered agent and/or r registered agent and/or the new registered office	egistered offi address here:	ce address on o	our records, <u>c</u>		name of the	 <u>1e new</u>
	na				± [7]	
Name of New Registered Agent:	119				宝 5	
New Registered Office Address:	<u>na</u>	P		<u>.</u>	<u> </u>	
		Enter Florid	la sireet address , Florio	G.† da	27	
_		City		Zı	p 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

 $(x_1, x_2, x_3, x_4, \dots, x_n) = (x_1, x_2, \dots, x_n)$

MGR = M $AMBR = A$	lanager .uthorized Member	na	
<u>Title</u>	<u>Name</u>	Address	Type of Action
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<u>Cote:</u> If the date	f other than the d s listed, the date must b inserted in this bloc tive date on the Dep	k does not r	nect the applic	able statutory	or more than 90 of filing requirem	(optional days after tiling ents, this date) g.) Pursuant to 605.02 e will not be listed
e record spec The 90th da	cifies a delayed of the contract of the contra	effective of distribution of the distribution	date, but no	ot an effecti	ve time, at 1	.2:01 a.m	on the earlier
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Filing Fee: \$25.00