15000121664

Office Use Only



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SECRETARY OF STAIR
FALLAHASSEE, FLORIDS

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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: BO DIDI	DLEY, LLC		
SCHOLCT,	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Charles W. Littell		
		Name of Person	
	Scruggs & Carmichael, PA	1	
		Firm/Company	
	4041 NW 37th Place Suite	В	
		Address	
	Gainesville, FL 32606		
		City/State and Zip Code	
	littell@scruggs-carmichael.		
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
Charles W. Littell		352 416-3474 at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	BO DIDDI	•						
(Name of the Lim	ited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)						
The Articles of Organization for this Limited I Florida document number <u>L15000121664</u>	Liability Company	were filed on July 15, 2015	and assigned					
This amendment is submitted to amend the fol	lowing:							
A. If amending name, enter the new name	of the limited liab	oility company here:						
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:		2234 NW 40th Terrace, Suite B						
(Principal office address MUST BE A STRE	ET ADDRESS)	Gainesville, FL 32605						
Enter new mailing address, if applicable:		2234 NW 40th Terrace, Suite B						
(Mailing address MAY BE A POST OFFICE BOX)		Gainesville, FL 32605	<u>}</u> ; ਰ					
B. If amending the registered agent and registered agent and/or the new registered of			enter the name of the new					
Name of New Registered Agent:	Charles W. Lit	tell	7A E ORIO					
New Registered Office Address:	2234 NW 40th	Terrace, Suite B						
	Gainesville	, Flori	da 32605					
		City	7in 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, 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>	Address	Type of Action		
AMBR	Charles W. Littell	2234 NW 40th Terrace, Suite B	Add		
		Gainesville, FL 32605	□ Remove		
			Change		
MGR	Charles w. Littell	2234 NW 40th Terrace, Suite B			
		Gainesville, FL 32605	□ Remove		
			□ Change		
MGR	Ronald W. Stevens	280 E. Hathaway Ave.			
		Bronson, FL 32621	■ Remove		
			☐ Change		
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Effective	date, if other	than the da	te of filing	3;				(optic	onal)			
<u>Note:</u> If t	ive date is listed, t the date inserted t's effective date	l in this block	does not n	neet the ap	plicable s	e of filing o	r more than ? ling require	0 days after ments, this	filing.) Pur date will	suant to not be	605.020 listed a	7 (3 s th
ne recor The 90	d specifies a Oth day after	delayed e	fective o	late, but	not an	effectiv	e time, a	: 12:01 a	.m. on	the ea	ırlier c	of:
Dated	April	27		<u> </u>	·							
	II	/ / /	1				1					

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Typed or printed name of signee

Filing Fee: \$25.00