Division of Corporations
Electronic Filing Cover Sheet

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.

(((H180003333003)))



H180003333003ABCV

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 : (050) 617-6383

From:

Account Name : ROBERTS, SEWARD & COMPANY PAGE

Account Number : 120040000179
Phone : (813)225-1040
Fax Number : (613)250-1555

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

BISHOP HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

T. CLINE
DEC - 3 2018

EXAMINER

Electronic Filing Menu

::-

Corporate Filing Menu

Help

COVER LETTER

	stration Se sion of Cor			
OUR INOT	Bishop Hol	dings, LLC		
SUBJECT: Name of Limited Liability Company				
The enclosed	Articles of	Amendment and fee(s) are subi	mitted for filing.	
		ndence concerning this matter		
		Bradley Roberts		
			Name of Person	
		Bishop Holdings, LLC	•	
			Pirm/Company	
		5026 Mud Lake Rd.		
			Address	 ~
		Plant City, Fl 33567		
			City/State and Zip Cede	
		jenifer.bishop@yahoo.com		
Pos Avalous in i	e		to be used for future annual report notifi	ication)
For further in	formation co	oncerning this matter, please or		30 SSE
Jennifer Bish	op 		813 225-1040 at ()	<u></u>
	Name o	f Person	Area Code Daytime	Cation) Cation Number Constitution Number Con
Englosed is a	about fact	ic following amount:		調用 公 ア O
≅ \$25.00 Fi		□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
3 25.00 Ft	uug ree	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
			. 5 .	
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 usee, FL 32314	STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	n ations nter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ted Liability Company as it now app (A Florida Limited Liability Company	cars on our records.)				
iability Company were filed on	8/12/15 and assigned	l			
·					
lowing:					
A. If amending name, enter the new name of the limited liability company here:					
words "Limited Llability Company," th	ne designation "L.L.C" or the abbreviation "L.L.C."				
cable:					
ET ADDRESS)					
·	2018				
BOX)	NAC AO	. i			
	S S S S S S S S S S S S S S S S S S S				
	1. 10 A				
l/or registered office address ffice address here:	on our records, enter the name of the	1C Dev			
· · · · · · · · · · · · · · · · · · ·	<u>ခ</u> ်ာက ယ				
Bradley Roberts					
	Pr				
Enter I	riorida sireei address				
Cliv	, Florida Zip Code	_			
	lability Company were filed on lowing: If the Ilmited liability company words "Limited Liability Company," the sable: ET ADDRESS) FOR registered office address iffice address here: Bradley Roberts	lowing: of the limited liability company here: words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." cable: ET ADDRESS) Words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." Cable: ET ADDRESS) Words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." Cable: ET ADDRESS) Words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." Cable: ET ADDRESS) Bradley: Bradley Roberts Enter Florida street address Florida Florida			

Now 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 fifle, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Bradley Roberts	5026 Mud Lake Rd., Plant City , FL 33567	Add
			Remove
			☐ Change
MGR	Jenifer Bishop	5026 Mud Lake Rd., Plant City, Fl 33567	□ Add
			■ Remove
	··		□ Change
			□ Rетоув
			Change
		<u></u>	Adag
		·	Remove
			Change

			□
			Change
			□ Remove
			Change

						••
						
		 				
						<u> </u>
	t , s.	: ·				
 						
	<u> </u>					
						
	<u> </u>		-		-	
	· .				- 5	211
					<u> ≨</u> .	<u> </u>
					ASS ASS)V 30
Tective date, if other and affective date is listed	ier than the date o	of filing:	r to date of filing or n	opt	ionalY: -:	
ote: If the date inse	rted in this block doe date on the Departme	es not meet the applicant of State's records	cable statutory filin	g requirements, th	is date will no	
	•				AND.	 ယ
	s a delayed effection the record is	tive date, but no filed.	ot an effective t	ilme, at 12:01		e earller o
ated	٨	2018				
Ω	TAK	· · · · · · · · · · · · · · · · · · ·	· ··· '			
	Signatu	ire of a member or auth	orized representative	of a member		-
Bradley Re	oberts					
		Tuned to note:	ed name of signee			

Page 3 of 3

Filing Fee: \$25.00

And the second s