

L17000192700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

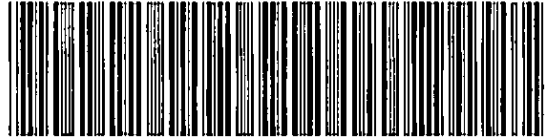
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

John M. Papp
Advised to change the
name to All Papp's
(10), 10/2/20 LLC

Office Use Only



500349376365

08/03/20--01015--008 **25.00

RECEIVED
FILING OFFICE
TALLAHASSEE, FLORIDA

2020 OCT 30 AM 11:00

FILED

OCT 30 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2020

JOHN M PAPPY III
ALL PAPPY'S LLC
12768 AGATITE ROAD
JACKSONVILLE, FL 32258

SUBJECT: ALL PAPPY'S TREE AND TRACTOR LLC
Ref. Number: L17000192700

We have received your document for ALL PAPPY'S TREE AND TRACTOR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

WHAT ARE YOU AMENDING NO CHANGES ARE ON THE FORM

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia S Young
Regulatory Specialist II

Letter Number: 720A00017995

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALL PAPPY'S TREE AND TRACTOR LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

JOHN M PAPPY III
Name of Person
ALL PAPPY'S LLC
Firm/Company
12768 AGATTE ROAD
Address
JACKSONVILLE, FL 32258
City/State and Zip Code
ALL3PAPPYS@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN M PAPPY III 904 903-1311
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the 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 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**

ALL PAPPY'S TREE AND TRACTOR LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2020 OCT 30 AM 11:00
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 09-15-2017 and assigned

Florida document number L17000192700.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ALL PAPPY'S LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida** _____
City Zip 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

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

John. Lopez
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00