19000186909

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	-
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Office Use Only



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June 29, 2020

CAROLYN MCFEE 3965 HIDDEN OAK DRIVE PENSACOLA, FL 32504

SUBJECT: 4517 GUERLAIN, LLC Ref. Number: L19000186909

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by a member or an authorized representative of a member.

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.

Susan Tallent Regulatory Specialist II

Letter Number: 020A00012805

fle 4/21/20

COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Co	orporations			
SUBJECT: 4	517 Guerlain	\ 11 C		
SUBJECT:	Name of Lie	niled Liability Company		
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for tiling		
		-		
Please return all corresp	ondence concerning this matte	r to the following:		
	Carolyn McFee			
		Name of Person		
		Firm/Company		
		v anne sompany		
	3965 Hidden Oak Drive			
		Address		
	Pensacola, FL 32504			
	-	City/State and Zip Code		
	mgmefee/@cox.net			
	E-mail address:	to be used for future annual report not	ification)	
For further information of	concerning this matter, please of	all:		
Carolyn McFee		850 698-1756		
Name o	of Person	at () Area Code Daytim	e Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee.	
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy	
		fautitional copy is element	(additional copy is enclosed)	
Mailing Addres	s;	Street Address:		
Registration S	Section	Registration Sec		
Division of Corporations		Division of Corporations		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4517 Guer	lain, LLC	
(Name of the Lin	ited Liability Company as it now appe (A Florida Limited Liability Company	<u>ars on our records.</u>)
The Articles of Organization for this Limited Florida document number 9 000 9		7/19/19 and assigned
This amendment is submitted to amend the fo	· · · · · ·	
	-	
A. If amending name, enter the new name	of the limited liability company l	<u>nere</u> :
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 appl	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	020
		2-
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u> BOX)</u>	<u></u>
B. If amending the registered agent and/or agent and/or the new registered office addresses		records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	Carolyn McFee	
New Registered Office Address:	3965 Hidden Oak Drive	
	Enter Flo	rida street address
	Pensacola	, Florida 32504
	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.

Garolyn M. Fo.

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>	<u>Address</u>	Type of Action
MGR	Kramer Litvak	40 South Palafox Street	
		Suite 300	■Remove
		Pensacola, FL 32502	Change
MGR	Carolyn McFee	3965 Hidden Oak Drive	
		Pensacola, F1. 32504	_
MGR	Michael G. McFee	3965 Hidden Oak Drive	= Add
		Pensacola, FL 32504	□Remove
			□ Change
		 	
			□Remove
			□Change
			□Add
			□Remove
		 	□Change
	 		□Add
			Remove
			□Change

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ective date, if other than effective date is listed, the date e: If the date inserted in thi ument's effective date on th	s block does not me	et the applicable	late of filing or mo e statutory filing	(opt ore than 90 days after requirements, th	ional) er filing.) Pursuant iis date will not b	to 605.020 e listed a
cord specifies a delayed effe s filed.	ctive date, but not a	n effective time	, at 12:01 a.m. o	n the earlier of: (b) The 90th day	after the
ed May 28		2020	-			
ed May 28	lyre M					
ed May 28	lyne M JSignature of a fine		ed representative o	of a member		_

Filing Fee: \$25.00