## Florida Department of State Division of Corporati

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.

(((H22000143686 3)))



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

: (850)617-6383

From:

Account Name

: JAMES RIDOUT SERVICES, INC.

Account Number : I20200000019 Phone

: (954)612-8899

Fax Number

: (954)530-0843

\*\*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 TIMOTHY CLAUS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

E BRUMBLEY

APR 2 1 2022

Electronic Filing Menu

Corporate Filing Menu

Help

## **COVER LETTER**

TO: Registration: Division of C	Section orporations		
Timothy SUBJECT:	Claus LLC		
	Name of Lin	nited Liability Company	· · · · · · · · · · · · · · · · · · ·
	of Amendment and fee(s) are sult	-	
	James Ridout	-	
		Name of Person	
	James Ridout Services, In	с	
		Firm/Company	
	2159 Wilton Drive		
		Address	
	Wilton Manors, FL 33305	i	
	swim2win.james@gmail.co	City/State and Zip Code	
	• • •	to be used for future annual report no	tification)
For further information	concerning this matter, please c		·
James Ridout		954 368-3817	
Name	of Person	at ()	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

Timothy Claus LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	W SDUCATS OF OUR records.)
The Articles of Organization for this Limited Liability Company were file Florida document number L22000130833	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
Clausbilt LLC	
The new name must be distinguishable and contain the words "Limited Liability Compar	ny," the designation "LLC" or the abbreviation "L.I., C."
Enter new principal offices address, if applicable:	20
(Principal office address MUST BE A STREET ADDRESS)	2-21 2
	7
	77 O P. 20
Enter new mailing address, if applicable:	<del>3</del> 504
(Mailing address MAY BE A POST OFFICE BOX)	52. O
	8
B. If amending the registered agent and/or registered office address or agent and/or the new registered office address here:	our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
E/I	nter Florida street address
Cirv	, Florida
New Registered Agent's Signature, if changing Registered Agent:	Zip Code
hereby accept the appointment as registered agent and agree to act in provisions of all statutes relative to the proper and complete performa- accept the obligations of my position as registered agent as provided for the peing filed to merely reflect a change in the registered office address, to company has been notified in writing of this change.	nce of my duties, and I am familiar with and

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:

Title	Name	Address	Type of Action
			□Remove
		·	□Change
			□Add
			□Remove
			Change
<del></del>			□Add
			□Change
			□Add
			□Remove
			□Change
		□Add	
			□Remove
		<del></del>	Change
			□Remove

Change

*menonal	g any other mior marrou, enter enauge	e(s) here: (Attach additional sheets, if necessary.)
<del></del> -		<del> </del>
<del></del>		
-		
		<del></del>
Note: If the	ate, if other than the date of filing:  date is listed, the date must be specific and cannot date inserted in this block does not meet the effective date on the Department of State's	ot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 the applicable statutory filing requirements, this date will not be listed as records.
record spec d is filed.	cifies a delayed effective date, but not an ef	ffective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated April	120 , 20	7
-	Signature of metab	er or authorized representative of a member
	_	er or audiorized representative of a method
Ī	James Ridout	

Filing Fee: \$25.00