## 1030000 10406

(Rec	questor's Name)	
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## **COVER LETTER**

	egistration Servision of Cor			
SHR IFCT		FAMILY LLC		
SOBSECT	· <del></del>	Name of Lim	ited Liability Company	
The enclose	ed Articles of a	Amendment and fec(s) are sub	omitted for filing.	
Please retu	n all correspo	ndence concerning this matter	to the following:	
		Matthew G. Curbow		
			Name of Person	
		<del></del>	Firm/Company	
		P.O. Box 2633		
			Address	
		Salem, Virginia 24153		
		mgcurbow@icloud.com	City/State and Zip Code to be used for future annual report notif	E
For further	information co	oncerning this matter, please c	·	acation)
William D	Clements, Es		239 436-1509 at()	
	Name of	Person	at () Area Code Daytimo	e Telephone Number
Enclosed is	a check for th	e 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)
	215 A 1.1		8	

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

20.57 15 77 9: 22

Curbow Family LLC			
(Name of the Limit	ed Liability Cor (A Florida Limit	mpany as it now appears on our re ted Liability Company)	ecords.)
The Articles of Organization for this Limited L Florida document number L03000010406	iability Compa	any were filed on March 21, 20	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, <u>enter the new name o</u>	f the limited 1	iability company here:	
The new name must be distinguishable and contain the v	ords "Limited L	iability Company," the designation "	1.1.C" or the abbreviation "L.1C."
Enter new principal offices address, if applic	able:		
Principal office address MUST BE A STREE	T ADDRESS	<u> </u>	
		<del></del>	
Enter new mailing address, if applicable:		P.O. Box 2633	
Mailing address MAY BE A POST OFFICE	BOX)	Salem, Virginia 24153	
•			
3. If amending the registered agent and/or regent and/or the new registered office address  Name of New Registered Agent:	~		nter the name of the new regis
	2425 Tamia	ımi Trail N., Ste. 211	
New Registered Office Address:		Enter Florida street ad	ddress
	Naples		. Florida <u>34103</u>
		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

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
MGR Matthew G. Curbow	Matthew C. Curbow	P.O. Box 2633	■Add
		Salem, Virginia 24153	□Remove
		<del> </del>	□Change
		<u></u>	□Add
		□Remove	
			□Change
			□Add
			□Remove
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		□Add	
		□Remove	
			□Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<del></del>
	<del></del>
Note: If t	date, if other than the date of filing:  (optional)  ve 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective date on the Department of State's records.
he record spord is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated Ma	2020 - 2020
	Signature of a member or authorized representative of a member
	Roy A. Curbow
	Typed or printed name of signee

Filing Fee: \$25.00