

L040000022523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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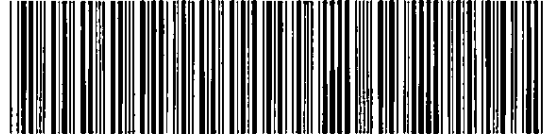
(Business Entity Name)

(Document Number)

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SEP 1 2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AJB OFFFLAGLER COUNTY, 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:

Penny K. Every

Name of Person

Jeffrey C. Sweet, Esquire

Firm/Company

595 W. Granada Blvd., Suite A

Address

Ormond Beach, FL 32174

City/State and Zip Code

penny.every@jsweetlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Penny K. Every

at 386 677-3431

Name of Person

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**

AJB OF FLAGLER COUNTY, LLC

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

The Articles of Organization for this Limited Liability Company were filed on March 24, 2004 and assigned
Florida document number L04000022523.

This amendment is submitted to amend the following:

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

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)

1760 N. U.S. Highway 1

Ormond Beach, FL 32174

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:

Dalton W. Baylor

New Registered Office Address:

4475 State Road 206

Enter Florida street address

Elkton

City

Florida 32145

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>	<u>Address</u>	<u>Type of Action</u>
MGR	JAMES E. WEITE	1 CREEK BEND WAY	<input type="checkbox"/> Add
		ORMOND BEACH, FL 32174	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BRUCE E. PAGE	1520 LAMBERT AVENUE	<input type="checkbox"/> Add
		FLAGLER BEACH, FL 32136	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DALTON W. BAYLOR	4475 STATE ROAD 206	<input checked="" type="checkbox"/> Add
		ELKTON, FL 32145	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2003. 25 Pp. 20

(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)

Typed or printed name of signee