

L04000074969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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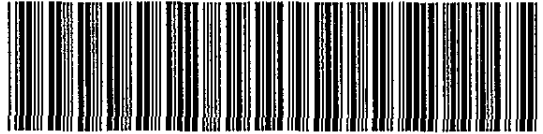
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

LR 01/28/05

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** JAMES TOLBERT TILE, LLC

**DOCUMENT NUMBER:** L04000074969

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

THOMAS R. MILLER

(Name of Contact Person)

MR. TAX

(Firm/ Company)

913 GULF BREEZE PKWY, STE #5

(Address)

Gulf Breeze, FL 32561

(City/ State/ and Zip Code)

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For further information concerning this matter, please call:

Tom Miller

(Name of Contact Person)

at ( 850 ) 934-4288

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

December 30, 2004

THOMAS R. MILLER  
MR. TAX  
913 GULF BREEZE PKWY, STE. #5  
GULF BREEZE, FL 32561

SUBJECT: JAMES TOLBERT TILE, LLC  
Ref. Number: L04000074969

We have received your document for JAMES TOLBERT TILE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is an LLC. Enclosed is the proper form for your entity.

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) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 004A00072117

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Lee,

Thank you for the  
LLC forms and information.

Tom Miller

P.S. This is the check for the  
James Tolbert tile amendment charge that  
was sent without the check.  
Thanks again.

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

JAMES TOLBERT TILE, LLC

(Present Name)  
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on OCTOBER 15, 2004 and assigned document number LO4000074969.

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

*see attached page.*

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TALLAHASSEE, FLORIDA

Dated JANUARY 21, 2005.



Signature of a member or authorized representative of a member

T.R. Miller

Typed or printed name of signee

Filing Fee: \$25.00

## Article V

The name and address of managing members/managers are:

Title: MGR  
JAMES B TOLBERT  
2841 HIDDEN SPRINGS CIR  
PENSACOLA, FL 32526

ADDED NEW MEMBER

TITLE: MEMBER  
SHERRON J. TOLBERT  
2841 HIDDEN SPRINGS CIR  
PENSACOLA, FL 32526

Signature of member or an authorized representative of a member  
Signature: Thomas R. Miller

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: JAMES TOLBIERT TILE, LLC
2. The mailing address of the limited liability company is : 2841 HIDDEN SPRINGS CIR.  
PENSACOLA, FL 32526

OCTOBER 15, 2004  
3. Date of filing/registration in Florida

604000074969  
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

SHERRON J. TOLBIERT  
Name  
2841 HIDDEN SPRING HIDDEN SPRINGS CIR  
Address  
PENSACOLA, FL 32526  
City, State and Zip

6. The name and address of the new registered agent and/or office:

RAYMOND G. HICKEY  
Name  
913 GULF BREEZE PKWY, STE #5  
Florida street address (P.O. Box NOT acceptable)  
GULF BREEZE FL 32561  
City, State and Zip

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Thomas R. Miller  
(Signature of a member or authorized representative of a member)

THOMAS R. MILLER  
(Printed or typed name of signee)

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 608, 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.

Paul C. Hensley  
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314