

L040000 85470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

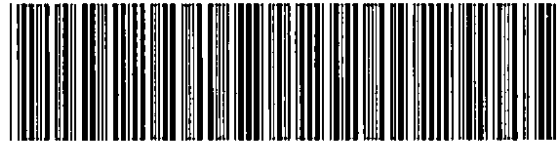
(Business Entity Name)

(Document Number)

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R. WHITE
FEB 03 2020

W/19-60276

AMENDED
DOCUMENT
1/30/2020



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 17, 2019

KATHY NAPIER
5753 HWY 85 N
#4922
CRESTVIEW, FL 32536

SUBJECT: PRECISION PRODUCT DEVELOPMENT, LLC
Ref. Number: L04000085470

We have received your document for PRECISION PRODUCT DEVELOPMENT, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

On the first line of page 1 of 3 please amend your name current that is listed on sunbiz "PRECISION PRODUCT DEVELOPMENT, LLC". The titles president is not a correct title.

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.

Catherine M Wood
Regulatory Specialist II

Letter Number: 419A00025584

CLIREITHA (SP?)
WAS A HUGE HELP IN HELPING ME
CORRECT THE MISTAKES IN THIS
FIRST ATTEMPT. PLS SEE THAT DIANE
CUSHING RECEIVES A COPY OF THIS.
THANK YOU.
Richard Buelod

1/14/2020 8:37 BUSY
1/21/2020 9:00 BUSY
1/24/2020 8:30
0 BUSY
2, WE AMENDMENT:
1, BUSY
0, DIDN'T LISTEN TO
MESSAGE
OPERATOR
ANSWER & TALK
TOLD ME THROUGH
TO CATHERINE
LET
MESSAGE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PORTABLE SHADE PROVIDERS, LLC (NEW)
PRECISION PRODUCT DEVELOPMENT, 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:

KATHY L. NAPIER
Name of Person

5753 Hwy 85 NORTH
Firm/Company ADDRESS

#4922
Address

CRESTVIEW, FL. 32536
City/State and Zip Code

KLNAPIER@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICHARD Bullock at (727) 709-5463
Name of Person Area Code Daytime Telephone Number

KATHY NAPIER 727 769-8444

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Precision Product Development, 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 11/24/2004 and assigned Florida document number LO4000085470

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:
PRECISION PRODUCT DEVELOPMENT, LLC
FOURTEEN-SEVEN PROVIDERS, LLC

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)

5753 HWY 85 NORTH
CRESTVIEW, FL 32536

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

KATHY L. NAPIER

New Registered Office Address:

PREVIOUS OFFICE - ABOVE
5753 HWY 85 NORTH
CRESTVIEW, Florida 32536
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.

Kathy L. Napier
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>
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PRESIDENT MGR MGR	<u>RICHARD BULLOCK</u>	1419 3rd STREET SW <u>5753 HWY 85 NORTH</u> GALE WATERS, FL 32760 <u>#4922 CRESTVIEW, FL 32356</u>	Remove <input checked="" type="checkbox"/> Change
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PRESIDENT MGR MGR	<u>KATHY L. NAPPER</u>	<u>5753 HWY 85 NORTH</u> <u>#4922</u> <u>CRESTVIEW, FL 32356</u>	<input checked="" type="checkbox"/> Add Remove
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☐ Change

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(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 11/14/, 2019

Richard Bullock

Signature of a member or authorized representative of a member

RICHARD Bullock

Typed or printed name of signee