

L04000093268

Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : MATTHEWS & JONES, LLP
Account Number : I19990000039
Phone : (850) 837-3662
Fax Number : (850) 654-1634

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TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
S & A OF NWFL, LLC**

Certificate of Status	0
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Page Count	04
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: S & A of NWFL, 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:

S. Thomas Peavey Hoffer

Name of Person

Matthews & Jones, LLP

Firm/Company

596 N. Perdon Blvd.

Address

Crestview, FL 32536

City/State and Zip Code

thoffer@destinlaw.com

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

For further information concerning this matter, please call:

S. Thomas Peavey Hoffer

at (850) 682-6211

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 &
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(additional copy is enclosed)

\$60.00 Filing Fee,
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(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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

S & A of NWFL, 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 12/27/2004 and assigned
Florida document number L04000093268

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)

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:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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TALLAHASSEE, FL
STATE SECRETARY OF STATE

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

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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>
Manager	Jeff S. Saidin	200 Hart Street	<input type="checkbox"/> Add
		Niceville, FL 32578	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Manager	Sarah E. Korecki	200 Hart Street	<input checked="" type="checkbox"/> Add
		Niceville, FL 32578	<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

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