

**LQ5000025977**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2017 MAR -8 A 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**n. BRUCE**  
**MAR 09 2017**

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Pappas & Sons, 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:

George G. Pappas

\_\_\_\_\_  
Name of Person

George G. Pappas, P.A.

\_\_\_\_\_  
Firm/Company

1822 N. Belcher Rd., Ste. 200

\_\_\_\_\_  
Address

Clearwater, FL 33765

\_\_\_\_\_  
City/State and Zip Code

george@pappaspa.com

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

For further information concerning this matter, please call:

George G Pappas

727  
at ( )

447-4999

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

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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**

Pappas & Sons, 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 15, 2005 and assigned Florida document number L05000025977.

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)

1822 N. Belcher Rd. Ste 200  
Clearwater, FL 33765

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1822 N. Belcher Rd. Ste 200  
Clearwater, FL 33765

**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:

George G. Pappas, P.A.

New Registered Office Address:

1822 N. Belcher Rd Ste 200

Enter Florida street address

Clearwater

City

, Florida

Zip Code

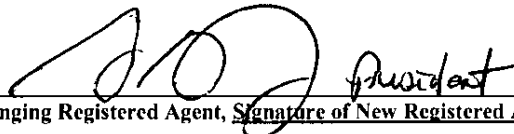
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2017 MAR - 8  
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**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.*

  
President

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	William E. Pappas	1822 N. Belcher Rd. Ste 200 Clearwater, FL 33765	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	William E. Pappas	6557 Hershey Circle N. Ridgeville, OH 44039	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Carrie D. Zervas	1822 N. Belcher Rd Ste 200 Clearwater, FL 33765	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Carrie D. Zervas	2620 Velventos Dr. Clearwater, FL 33761	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	George B. Pappas	1822 N. Belcher Rd Ste 200 Clearwater, FL 33761	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	George B. Pappas	1822 N. Belcher Rd Ste 200 Clearwater, FL 33765	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

2011 MAR - 8 A 11:16  
STATE  
ARMY OF FLORIDA  
TALLAHASSEE, FLORIDA

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2017 MAR - 8 A 11:16  
STATE ARCHIVES OF FLORIDA  
TALLAHASSEE, FLORIDA

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Dated March 3, 2017

Signature of a member or authorized representative of a member

George G. Lappas MGR

Typed or printed name of signee