

NOV-07-2013

Division

JAMES C. BARTH, P.A.

FAX No. 850 654 6797

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : JAMES C. BARTH, P.A.
Account Number : I20050000013
Phone : (850) 654-9099
Fax Number : (850) 654-6797

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TALLAHASSEE, FLORIDA

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

Email Address: avis@carillonweddings.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CARILLON WEDDINGS LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

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JAMES C BARTH, PA

FAX No. 850 654 6797

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CARILLON WEDDINGS 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:

Avis Glenister

Name of Person

c/o James C. Barth, P. A.

Firm/Company

P. O. Box 6966

Address

Miramar Beach, FL 32550

City/State and Zip Code

avis@carillonweddings.com

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

For further information concerning this matter, please call:

Avis Glenister

Name of Person

at (**850**) **231-0007**

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/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**

CARILLON WEDDINGS 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 April 8, 2005 and assigned
Florida document number L05000034294

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 end with 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)

75 Summer Wind Trail

Santa Rosa Beach, FL 32459

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

75 Summer Wind Trail

Santa Rosa Beach, FL 32459

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:

Avla Glenister

New Registered Office Address:

75 Summer Wind Trail

Enter Florida street address

Santa Rosa Beach

Florida 32459

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 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.


If Changing Registered Agent, Signature of New Registered Agent

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Victoria Volpone	6426 Monarch Court	<input type="checkbox"/> Add
		Hoschton, GA 30548	<input checked="" type="checkbox"/> Remove
MGRM	Perry Volpone	6426 Monarch Court	<input type="checkbox"/> Add
		Hoschton, GA 30548	<input checked="" type="checkbox"/> Remove
MGRM	Avis Glenister	75 Summer Wind Trail	<input checked="" type="checkbox"/> Add
		Santa Rosa Beach, FL 32459	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated November 7, 2013.

	
Signature of a member or authorized representative of a member	
<u>Victoria Volpone</u>	<u>Avis Glenister</u>
Typed or printed name of signer	

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Filing Fee: \$25.00

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