# L05000057776

(Re	equestor's Name)	
(Ac	ddress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phon	e #)
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#### **COVER LETTER**

	gistration Se vision of Cor			
SUBJECT:		ervices LLC		
SUBJECT:	·	Name of Lim	ited Liability Company	<del></del>
		Amendment and fee(s) are sub-	-	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		Clarence Pearson		
			Name of Person	<del></del>
		C Pearson Builders LLC		
			Firm/Company	
	275 John Knox road apt U105			
		1	Address	
		Tallahassee, FL 32303		
			City/State and Zip Code	
		Clarencelepe@yahoo.com	to be used for future annual report notific	maina)
Dire freehoe	information o	oncerning this matter, please or		шин)
		oncerning this matter, piease ca		
Clarence P			850 405-2787 at () Area Code Daytime	
	Name of	f Person	Area Code Daytime *	Felephone Number
Enclosed is	a check for th	ne 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:

TO:

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

FILED 2011 JUL 24 AM 10: 21

Crestlake Services LLC

(Name of the Limited Liability Company as it now appears on our records.) in ASSI STATES OF THE COMPANY OF THE

The Articles of Organization for this Limited I Florida document number <u>L05000057776</u>		were filed on 6/10/20	05 and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	ility company here:		
C Pearson Builders LLC				
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the design	ation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		275 John Knox road apt U105		
(Principal office address MUST BE A STREET ADDRESS)		Tallahassee, FL 3230	13	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)  B. If amending the registered agent and registered agent and/or the new registered of	1/or registered of		)3	
Name of New Registered Agent:	Tiffinie Larkins	S		
New Registered Office Address:	275 John Knox	<u> </u>		
		Enter Florida si	reet address	
	Tallahassee		, Florida <u>32303</u>	
		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.

If Changing Registered Agent Signature of New Registered Agent

## If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Neal Scoppettuolo	4333 Scheval blvd Lutz, Fl 33558	
			■ Remove
			Change
MGR	Neal Scoppettuolo	8509 Kings Rail way	
		Tampa, FL 33647	■ Remove
			Change
MGR	Lee Huelle 157 Ath	157 Athenian way	■ Add
		Tarpon Springs, FL 34689	☐ Remove
			Change
			A 📆
			HERRON TO Change
			::::::::::::::::::::::::::::::::::::
			□ Remove
			Change
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			Change

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lote: If the date inserted in	this block does	not meet the app	licable statutory	filing requirements.	, this date will not be listed as
ocument's effective date or	the Department	of State's recor	ds.		
			not an effecti	ve time, at 12:0	)1 a.m. on the earlier of
The 90th day after th	ie record is fil	led.			
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ated		· <u>2018</u> ·			
	1)				
1 V. s.	Vu.			itive of a member	

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Typed or printed name of signee

Filing Fee: \$25.00