

205000064291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

2022 OCT 20 PM 4: 36

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**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Townsend Adventures 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:

Misty Townsend  
Name of Person

Townsend Adventures LLC  
Firm/Company

4398 Willkerson Bluff Rd.  
Address

Holt, FL 32564  
City/State and Zip Code

mstadventures@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Misty Townsend at (850) 687 9753  
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 & 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 Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2022 OCT 20 AM 11:11

October 6, 2022

MISTY TOWNSEND  
4398 WILKERSON BLUFF ROAD  
HOLT, FL 32564

SUBJECT: TOWNSEND ADVENTURES LLC  
Ref. Number: L05000064291

We have received your document for TOWNSEND ADVENTURES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 822A00020224

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

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Townsend Adventures LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 6/29/2005 and assigned  
Florida document number LO5000064291

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)

4398 Wilkerson Bluff Rd.  
Holt, FL 32564

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as principle

**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*

**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, 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>
owner mgr	Justin Rand	122 Swaying Pine Court Crestview, FL 32539	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
		and/or 310 Bayou Circle Freeport, FL 32439	<input type="checkbox"/> Change
mgr	Thomas A. McCoy III	94 Prophets PKWY SRB, FL 32459	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Ethan Townsend	4398 Wilkerson Bluff Rd Holt, FL 32564	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Landon Townsend	4398 Wilkerson Bluff Rd Holt, FL 32564	<input type="checkbox"/> Change <input checked="" 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

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

Multiple horizontal lines for amending information.

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SECRETARY OF STATE  
TALLAHASSEE, FL

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E. Effective date, if other than the date of filing: 3-25-2022 (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.

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 6-6 2022

Misty Townsend owner  
Signature of a member or authorized representative of a member

Misty Townsend  
Typed or printed name of signee