

LO6 0000 60142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

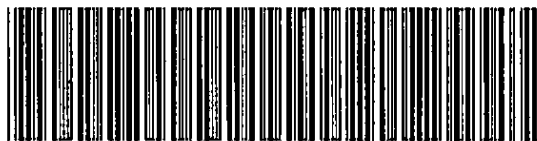
(Business Entity Name)

(Document Number)

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2020 OCT 14 PM 5:56

O SIMMONS

OCT 01 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: James O'Day Company, 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:

Joseph E. Minichler
Name of Person

Joseph E. Minichler, PA
Firm/Company

1037 Pathfinder Way, Ste. 150
Address

Rockledge, Florida 32955
City/State and Zip Code

uri72@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph E. Minichler at (321) 689-0505
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2023 AUG 14 PM 5:56
Y. LLC

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

n/a

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

Title Name Address Type of Action

MGR MINICLIER
STEPHANIE S. 50 Anchor Dr, Indian Harbour Beach
Florida 32937 ☐ Add

_____ ☒ Remove

_____ ☐ Change

_____ ☐ Add

_____ ☐ Remove

_____ ☐ Change

_____ ☐ Add

_____ ☐ Remove

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_____ ☐ Change

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

n/a

2020 AUG 14 PM 5:56

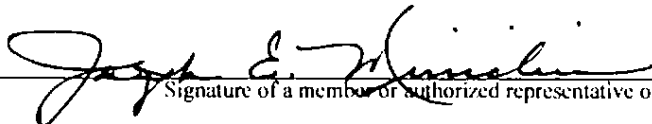
E. Effective date, if other than the date of filing: date of filing (optional)

(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.

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 August 11 2020



Signature of a member or authorized representative of a member

Joseph E. Miniclier

Typed or printed name of signee