

L06006101661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400215441154

01/03/12--01021--024 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN -3 PM 3:22

T. HAMPTON

JAN -5 2012

EXAMINER

COVER LETTER

TO: • Registration Section
Division of Corporations

SUBJECT: Panama City Roller Derby
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:

Emily Kruithoff

Name of Person

Panama City Roller Derby

Firm/Company

P.O. BOX 36045

Address

Panama City, FL 32412

City/State and Zip Code

kruithoe69@gmail.com

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

For further information concerning this matter, please call:

Emily Kruithoff

Name of Person

at (616) 610-9268

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 JAN -3 PM 3: 22

Panama City Roller Derby, 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 10/16/2006 and assigned
Florida document number L06000101661.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: Emily Kruithoff

New Registered Office Address: 2901 Glenview Avenue

Enter Florida street address

Panama City, Florida 32405

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

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>
<u>PRES</u>	<u>Friedrich, Heather L</u>	<u>2419 Beech St</u> <u>Panama City Beach, FL 32408</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>PRES</u>	<u>Kruithoff, Emily D</u>	<u>2901 Glenview Ave</u> <u>Panama City, FL 32405</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VP</u>	<u>Calhoun, Melanie C</u>	<u>826 Florida Ave. Apt C</u> <u>Lynn Haven, FL 32444</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VP</u>	<u>Szekely, Aida P</u>	<u>1115 North Haven Circle</u> <u>Lynn Haven, FL 32444</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>SEC</u>	<u>Hilton, Marsha A</u>	<u>3913 Pisa Drive Apt M1</u> <u>Lynn Haven, FL 32444</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>SEC</u>	<u>Hyatt, Amanda D</u>	<u>7304 Keiber Circle</u> <u>Youngstown, FL 32464</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

REMOVE: TRES Marvin, Sydney M

4916 Hensey Ave, Panama City FL 32404

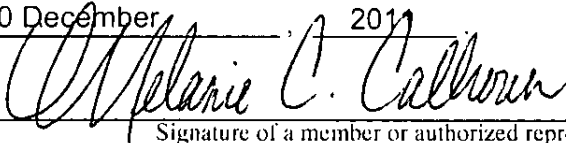
ADD: TRES Harper, Naomi M

3502 North Jenks Ave Apt 3306, Panama City FL 32405

Dated

30 December

201



Signature of a member or authorized representative of a member

Melanie C Calhoun

Typed or printed name of signee

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN -3 PM 3:22