10600116168

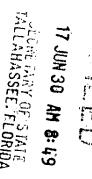
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400300836674

06/30/17--01013--019 **25.00



[PH] 0 3 2017

COVER LETTER

Division of Co	orporations		
Flomac E SUBJECT:	nterprises LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	Floyd MCkenzie		
		Name of Person	
	Flomac Enterprises LLC		
		Firm/Company	
	1725 Robinhood LN		
	11 40 00 00 00 00 00	Address	
	Clearwater, FL 33764		
		City/State and Zip Code	
	flomac1202@earthlink.net		
•	E-mail address: ()	to be used for future annual report notif	fication)
For further information	concerning this matter, please ca	all:	
Floyd McKenxie		727 433-1142	
Name	of Person	at () Area Code Daytime	e 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:

TO: · Registration Section

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

Flomac Enterprises LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on December 5, 2006	and assigned
Florida document number L06000116168		
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	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u> </u>	
	-	
		1 3
Enter new mailing address, if applicable:		ATT SE
(Mailing address MAY BE A POST OFFICE BOX)		လွှည်း မှ
		M _C
	į	3 (1)
B. If amending the registered agent and/or registere		· · · · · · · · · · · · · · · · · · ·
registered agent and/or the new registered office address	here:	." •
Name of New Registered Agent:		
New Registered Office Address:		
Trem registered Office reduces.	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>	Address	Type of Action
AMBR	Ruby M. McKenzie	1725 Robinhood LN	Add
		Clearwater, FL 33764	Remove
			Change
MGR	Ruby M. McKenzie	1725 Robinhood LN	
		Clearwater, FL 33764	Remove
			Change
			Add
			☐ Remove
		-	Change
			AH DE
		A	ASSE PEChange
			OR A Add
			Remove
			Change
			Add
			Remove
			□ Change

						_
						_
						-
						_
						_
						_
				<u> </u>	=======================================	_
				LAHC LARC		
				ASSE	30	- /44.
					3	-
				المراوفية	- do	
				0RIC	<u></u>	
				7-		
						_
			. -			_
		April 5, 2017				
fective date, if	other than the date of filir sted, the date must be specific ar	18:	of filing on many than 00 Am	(optional)	۲	05 030
ote: If the date in	serted in this block does not	meet the applicable s	tatutory filing requirement	s, this date will n	ot be li	sted a
ocument's effective	re date on the Department of	State's records.				
			•			
	ies a delayed effective after the record is filed		effective time, at 12	:01 a.m. on th	ne ear	lier c
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		۸.				
ated	Hrylm, W					
()	10 000 61	داء .				
v -	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	1 Harry Charles				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00