07000056074

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2, ,
(Document Number)
Certified Copies Certificates of Status
Considerative to Siling Officer
Special Instructions to Filing Officer:





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M. MILLIGAN

OCT 02 2018

COVER LETTER

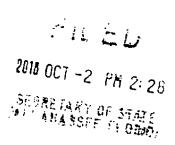
TO:	Registration Sec Division of Corp				
SUBJE		Sitters, LLC			
SUBJE	C1;	Name of Limited Liability Company			
The enc	losed Articles of A	Amendment and fee(s) are submitted for filing.			
Please r	eturn all correspor	ndence concerning this matter to the following:			
		Mary Mangan Bouchard			
		Name of Person			
		Seminole Sitters, LLC			
		Firm/Company			
		1014 Alabama Avenue			
		Address			
		Lynn Haven, Florida 32444			
		City/State and Zip Code info@seminolesitters.com			
		E-mail address: (to be used for future annual report notification)			
For furt	her information co	oncerning this matter, please call:			
Mary N	Mangan Bouchar	rd 850 205-3161, ext 0			
Name of Person Area Code Daytime Telephone Number					
Enclose	d is a check for the	ne following amount:			
1 \$25	.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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



(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 29 May 2007 and assigned Florida document number L07000056074

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 "LLC."

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)

Lynn Haven, Florida 32444

B. If amending the registered agent and/or registered office address on our records, enter the name of the new

Mary Mangan Bouchard

1014 Alabama Avenue

Lynn Haven

New Registered Agent's Signature, if changing Registered Agent:

registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Seminole Sitters, LLC

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

Enter Florida street address

, Florida 32444 Zip Code

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>	Type of Action
MGRM	Mary Rogers		_ □ Add
			
		1200-5 Cross Creek Way Tallahassee, Florida 32301	☑ Remove
			L Remove
			Change
моп	Mary Mangan Bouchard	1014 Alabama Avenue	
MGR 		Lynn Haven, Florida 32444	⊡ Add
			Remove
			Change
	Andrew T. Bouchard	1014 Alabama Avenue	
AMBR	Andrew 1. Bouchard	Lynn Haven, Florida 32444	_ Add
-			
			Remove
			□ Change
			
		- · · · · · · · · · · · · · · · · · · ·	Remove
			Change
			Li Change
			☐ Add
			Remove
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			Add
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			Change

E. Effective date, if other than the date of filing: (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. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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 (b) The 90th day after the record is filed. Dated 3 October 2018 Signature of a member or authorized representative of a member	Mary Rogers is Mary Mangan Bouchard. My name has been changed via marriage.				
(If an effective date, if other than the date of filing:					
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Signature of a member or authorized representative of a member	3 October 2018	3			
Signature of a member or authorized representative of a member		——· >d	2016		
بال الله الله الله الله الله الله الله ا	Signature of a member of	or authorized representative of a member	0CT		
Mary Mangan Bouchard	Mary Mangan Bouchard	بي المراجع الم	-2 PK		

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Filing Fee: \$25.00