

LD8000078270

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(City/State/Zip/Phone #)

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09 APR 30 PM 2:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

MAY 01 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CROWN & FAMILY 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:

PEGGY WISE BOJANOWICZ
(Name of Person)

(Firm/Company)

28- VILLAGE DR -
(Address)

FLAGLER BEACH FL 32136
(City/State and Zip Code)

For further information concerning this matter, please call:

PEGGY WISE BOJANOWICZ at (386) 439-5973
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 APR 30 PM 2:59

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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**

CROWN & FAMILY 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 8-14-08 and assigned
Florida document number L08000078270

FILED
09 APR 30 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

28 VILLAGE DR
FLAGLER BEACH
FL 32136) SAME

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

28 VILLAGE DR
FLAGLER BEACH FL 32136

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:

PEGGY WISE BOJANOWICZ

New Registered Office Address:

28 VILLAGE DR

(Enter Florida street address)

FLAGLER BEACH

(City)

Florida 32136

(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.

Peggy Wise Bojanowicz
(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>
MGR	PEGGY WISE BOJANOWICZ	28- VILLAGE DR	<input checked="" type="checkbox"/> Add
		FLAGLER BEACH	<input type="checkbox"/> Remove
		FL 32136	
MGRM	BENJAMIN PAUL WISE	28- VILLAGE DR	<input checked="" type="checkbox"/> Add
		FLAGLER BEACH	<input type="checkbox"/> Remove
		FL 32136	
MGR	IMTIAZ CROWN	45- ROUND TOWN DR	<input type="checkbox"/> Add
		Palm Coast	<input checked="" type="checkbox"/> Remove
		FL 32136	
MGRM	MOAZZAM IMTIAZ	45- ROUND TOWN DR	<input type="checkbox"/> Add
		Palm Coast	<input checked="" type="checkbox"/> Remove
		FL 32136	
MGRM	MOAIZ IMTIAZ	45- ROUND TOWN DR	<input type="checkbox"/> Add
		Palm Coast	<input checked="" type="checkbox"/> Remove
		FL 32136	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated

4/28/09



Signature of a member or authorized representative of a member

IMTIAZ CROWN

Typed or printed name of signee

FILED
09 APR 30 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA