

LO8006110194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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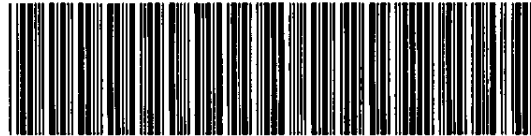
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

December 27, 2013

**TO: Registration Section
Division of Corporations**

SUBJECT: North Florida Seafood & Crabs, 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:

Brice M. McEvoy

Name of Person

North Florida Seafood & Crabs, LLC

Firm/Company

7 Fairway Lane

Address

Jacksonville, FL 32250

City/State and Zip Code

whispearia@aol.com

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

For further information concerning this matter, please call:

Brice McEvoy

Name of Person

904 652-5900 or (904) 813-0168

at ()

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**

North Florida Seafood & Crab, 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 12/1/2008 and assigned
Florida document number L08000110194.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

No change

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)

7 Fairway Lane

Jacksonville Beach, FL 32250

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as above.

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:

Brice M. McEvoy

New Registered Office Address:

7 Fairway Lane

Enter Florida street address

Jacksonville Beach

Florida 32250

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.

Brice M. McEvoy
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	Brice M. McEvoy	7 Fairway Lane	<input checked="" type="checkbox"/> Add
		JACKSONVILLE, Bch, FL. 32250	<input type="checkbox"/> Remove
MGRM	David M. McEvoy	1841 Nightfall Drive	<input type="checkbox"/> Add
		Neptune Beach, FL 32266	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Add
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SEAL OF THE
STATE OF FLORIDA
13 DEC 2011
13 DEC 2011
13 DEC 2011

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

No further changes.

Dated December 27, 2013

David M. McEvoy

Signature of a member or authorized representative of a member

David M. McEvoy

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 DEC 31 AM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA