

L09000029983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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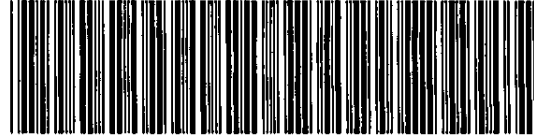
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 27 2016
Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ASSET PRESERVATION PARTNERS 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:

VICKIE SMITH, Managing Partner
Name of Person
ASSET PRESERVATION PARTNERS
Firm/Company
3951 Copeland Drive
Address
Zephyrhills FL 33542
City/State and Zip Code
Vickiesapp@hollandsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VICKIE SMITH at (904) 753-4607
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

ASSET PRESERVATION PARTNERS 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 _____ and assigned
Florida document number _____.

This amendment is submitted to amend the following:

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

N/A

The new name must be distinguishable and contain 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)

3951 Copeland Dr.
Zephyrhills, FL 33542

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME as Above

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TALLAHASSEE, FLORIDA

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:

VICKIE L. SMITH, Managing Partner

New Registered Office Address:

same as above

Enter Florida street address

same as above

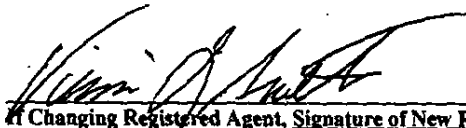
Florida

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

Title	Name	Address	Type of Action
Managing Partner	JAMES W. PREDEN	941 LAKE (PREDEN) PARK	Remove
		LAKELAND, Florida	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Managing Partner	VICKIE L. SMITH	3951 Copeland Dr.	<input checked="" type="checkbox"/> Add
		Zephyrhills, FL 33542	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Partner	Michael Lynch	3951 Copeland Dr	<input checked="" type="checkbox"/> Add
		Zephyrhills, FL 33542	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

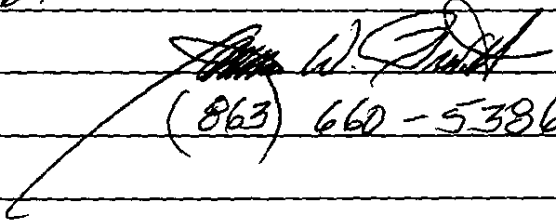
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

5/19/2016

TO WHOM IT MAY CONCERN.

ON 5/17/2016 ASSET PRESERVATION PARTNERS WAS SOLD WITH ALL RIGHTS TRANSFERRED TO MS. VICKIE SMITH (NEW MANAGING PARTNER) & MICHAEL LYNCH (NEW PARTNER). I JAMES W. PREVATT OF 941 LACE WEEPON POINTE LAKELAND FL 33805 (PREVATT MANAGING PARTNER) RECEIVED ALL RESPONSIBILITIES ON 5/17/2016.

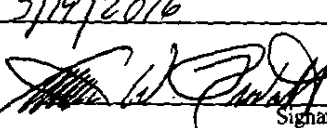

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)
(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 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 of:
(b) The 90th day after the record is filed.

Dated 5/19/2016


 Vickie L. Smith Managing Partner
Signature of a member or authorized representative of a member


JAMES W. PREVATT
Typed or printed name of signee


ASSIGNMENT OF INTEREST IN
ASSET PRESERVATION PARTNERS, LLC

JAMES W. PREVATT, Managing Partner and Sole Owner of ASSET PRESERVATION PARTNERS, LLC hereby assigns all of his interest in ASSET PRESERVATION PARTNERS, LLC unto VICKIE L. SMITH and MICHAEL LYNCH under the terms of the Purchase of Business Agreement dated May 17, 2016.

Dated this 17th day of May, 2016.


Witness SCOTT H. LANGSTON


Witness Teresa C. Sumner


JAMES W. PREVATT, Managing
Partner and Sole Owner of
Asset Preservation Partners,
LLC

STATE OF FLORIDA
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 17th day of May, 2016, by JAMES W. PREVATT, Managing Partner and Sole Owner of ASSET PRESERVATION PARTNERS, LLC, personally known to me or who produced n/a as identification.


Notary Public:
My Commission Expires:

