

U0000001554

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PICK-UP WAIT MAIL

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(Document Number)

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TALLAHASSEE, FLORIDA
16 JUN 22 4H 10: 59

EFFECTIVE DATE
6/22

JUN 22 2016
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 16, 2016

JILL GRIFFITHS
132 SW MADISON CIRCLE N
ST PETERSBURG, FL 33703

SUBJECT: CLARK GRIFFITHS PHOTOGRAPHY L.L.C.
Ref. Number: L10000001554

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SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
16 JUN 22 AM 10:59

We have received your document for CLARK GRIFFITHS PHOTOGRAPHY L.L.C. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

NO ACCOUNT NUMBER ON CHECK

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 616A00012685

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Clark Griffiths Photography 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:

Jill Griffiths
Name of Person

Clark Griffiths Photography LLC
Firm/Company

132 SW Madison Circle N
Address

St Petersburg FL 33703
City/State and Zip Code

Kim@cubbythekay.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Kim Justice at (727) 896 1042
Name of Person 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**

(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:

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)

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Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

New Registered Office Address: _____

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Jill Griffiths	132 SW Madison Circle N	<input checked="" type="checkbox"/> Add
		St Petersburg, FL 33703	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MM	Clark Griffiths	132 SW Madison Circle N	<input checked="" type="checkbox"/> Add
		St. Petersburg, FL	<input checked="" type="checkbox"/> Remove
		33703	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

16 JUN 22 11:10:59
SECRETARY OF STATE
TALLAHASSEE, FL 32304

