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(Address)

(City/State/Zip/Phone #)

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A. PARISHANI

SEP 17 2023

COVER LETTER

TO: Registration Section
Division of Corporations

Craft & Stratton Holdings, LLC

SUBJECT: _____
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:

Andrew J. Wit, Esq

Name of Person

Wit Law, PLLC

Firm/Company

2102 West Cass Street, 2nd Floor

Address

Tampa, FL 33606

City/State and Zip Code

awit@witlaw.com

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

For further information concerning this matter, please call:

Andrew J. Wit

813

522-6069

at (_____) _____

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 AUG 29 PM 12:33

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Craft & Stratton Holdings, 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 January 28, 2010 and assigned
Florida document number L10000010607

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)

4740 Cleveland Heights Blvd, Ste 5

Lakeland, FL 33813

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4740 Cleveland Heights Blvd, Ste 5

Lakeland, FL 33813

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:

Wit Law, PLLC

New Registered Office Address:

2102 W. Cass St., 2nd Floor

Enter Florida street address

Tampa

City

Florida

33606

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>
AMBR	D & C Wells, LLC	9404 Bryant Rd.	<input checked="" type="checkbox"/> Add
		Lakeland, FL 33809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	John K. Craft	2209 Sawgrass Village Drive	<input type="checkbox"/> Add
		Ponte Vedra Beach, FL 32082	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gerald L. Stratton	2209 Sawgrass Village Drive	<input type="checkbox"/> Add
		Ponte Vedra Beach, FL 32082	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2023 / AUG 29 PM 12: 33

11/11/2023 12:33 PM

(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)

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

Signature of a member or authorized agent

Signature of a member or authorized representative of a member

Andrew J. Wit

Typed or printed name of signee