

U0000021514

Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LITTLE GOLF STOP LLC

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T. CLINE
NOV 27 2018
EXAMINER

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LITTLE GOLF STOP 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:

Cheyenne Moseley
Name of Person
Legalzoom.com, Inc.
Firm/Company
101 N. Brand Blvd., 11th Floor
Address
Glendale, CA 91203
City/State and Zip Code
danner.michael@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Moseley at (800) 773-0888 ext. 9724
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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 NOV 26 AM 11:29

FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LITTLE GOLF STOP 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 02/25/2010 and assigned Florida document number L10000021514.

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)

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:

MICHAEL DANNER

New Registered Office Address:

1298 E NORVELL BRYANT HWY UNIT B

Enter Florida street address

HERNANDO


City

Florida 34442

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.

 MICHAEL DANNER
If Changing Registered Agent, Signature of New Registered Agent

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 NOV 26 AM 11:29

FILED

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TO
ARTICLES OF ORGANIZATION
OF

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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)

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: MICHAEL DANNER

New Registered Office Address: 1298 E NORVELL BRYANT HWY UNIT B

Enter Florida street address

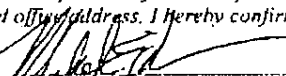
HERNANDO Florida 34442

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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MICHAEL DANNER
(Change Registered Agent, Signature of New Registered Agent)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

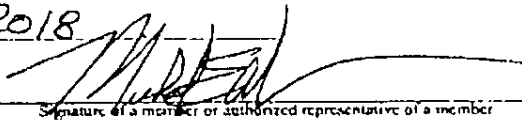
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MICHAEL DANNER	1298 E NORVELL BRYANT HWY UNIT B	<input checked="" type="checkbox"/> Add
		HERNANDO, FL 34442	<input type="checkbox"/> Remove
MGR	KATACHAPAN SAHATTECHO	1298 E NORVELL BRYANT HWY UNIT B	<input checked="" type="checkbox"/> Add
		HERNANDO, FL 34442	<input type="checkbox"/> Remove
MGR	MARGARET CART	7959 N POCONO DRIVE	<input type="checkbox"/> Add
		CITRUS SPRINGS, FL 34434	<input checked="" type="checkbox"/> Remove
MGR	RONALD CART	7959 N POCONO DRIVE	<input type="checkbox"/> Add
		CITRUS SPRINGS, FL 34434	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> move

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 TALLAHASSEE, FLORIDA

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

E. Effective date, if other than the date of filing: _____ (optional)
 (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 16 Nov. 2018



Signature of a member or authorized representative of a member

MICHAEL DANNER

Typed or printed name of signer

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 DEPT. OF STATE
 TALLAHASSEE, FLORIDA

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