

LD 000035957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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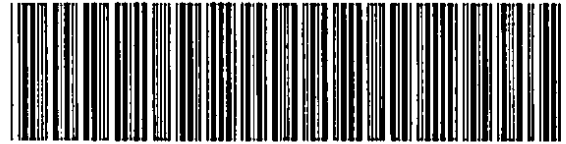
(Business Entity Name)

(Document Number)

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C. BRUMBLEY
JAN - 4 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Crossroads To Independence, 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:

Valeria Foster

Name of Person

Crossroads to Independence, LLC

Firm/Company

7724 Lynchburg CT

Address

Jacksonville, FL

City/State and Zip Code

Vfoster@cticares.com

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

For further information concerning this matter, please call:

Jeffrey Biddulph

904 536-3896
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

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

CROSSROADS TO INDEPENDENCE, 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 4/1/2010 and assigned
Florida document number LJ0000035957

This amendment is submitted to amend the following:

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

NA

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)

7724 LYNCHBURG COURT W

JACKSONVILLE, FL 32277

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7724 LYNCHBURG COURT W

JACKSONVILLE, FL 32277

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:

Valeria Foster

New Registered Office Address:

7724 LYNCHBURG COURT W

Enter Florida street address

JACKSONVILLE

Florida 32277

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>
Owner	Biddulph, Jeffrey	230 107th street circle east unit 109	<input type="checkbox"/> Add
		Bradenton, FL 34212	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Foster, Valeria	7724 WEST LYNCHBURG CT.	<input type="checkbox"/> Add
		Jacksonville, FL 34212	<input type="checkbox"/> Remove
		(Change to Owner/ Registered Agent)	<input checked="" type="checkbox"/> Change
MGR	Shannon, Violet	230 107th street circle east unit 109	<input type="checkbox"/> Add
		Bradenton, FL 34212	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Registered	Bibler, Danielle	230 107th street circle east unit 109	<input type="checkbox"/> Add
		Bradenton, FL 34212	<input checked="" 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

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

Effective Feb 1 2022 at 7:30 A.M., I Jeffrey Biddulph will transfer sole ownership and forfeit all rights as an officer/ manager within Crossroads to Independence, LLC.

Valeria Foster will take 100% control of Crossroads To Independence, LLC as Owner/Registered Agent.

Please remove my mother Violet Shannon, and sister Danielle Bibler altogether. ***Nothing else follows***

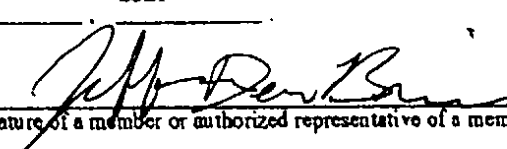
E. Effective date, if other than the date of filing: Feb 1 2022 at 7:30 A.M. (optional)

(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 December 7, 2021


Signature of a member or authorized representative of a member

Jeffrey Dean Biddulph

Typed or printed name of signer

Filing Fee: \$25.00