

L10000086172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

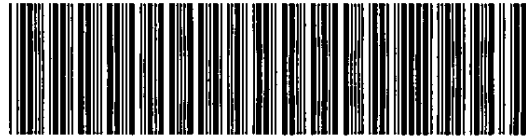
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. Shivers DEC 03 2014

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 18, 2014

MARTHA MCDOWELL
224 S 7TH ST
FERNANDINA BEACH, FL 32034

SUBJECT: MCDOWELL SOUTH LLC
Ref. Number: L10000086172

We have received your document for MCDOWELL SOUTH LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 414A00024434

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MCDOWELL SOUTH, 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:

Martha McDowell
Name of Person
MCSandall, LLC
Firm/Company
224 South 7th Street
Address
Fernandina Beach FL 32034
City/State and Zip Code
MCSANDALL@COMCAST.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Martha McDowell at (734) 834.0105
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**

MCDOWELL SOUTH, 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 8/17/10 and assigned Florida document number L 10 000 86172.

This amendment is submitted to amend the following:

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

MCSANDALL, LLC

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)

224 S. 7th Street
Fernandina Beach
FL 32034

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:

Martha McDowell

New Registered Office Address:

226 South 7th Street

Enter Florida street address

Fernandina Beach

Florida

City

32034
Zip Code

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TALLAHASSEE, FLORIDA

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

MGR = Manager
AMBR = Authorized Member.

AMBR = Authorized Member.

AMBR James Sandall

Fernandina Beach ☐ Remove

Florida 32034

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☐ **SECRETARY OF STATE**
☐ **TALLAHASSEE, FLORIDA**
☐ Remove

D. If amending any other information, enter change(s) 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 11/28, 2014.



Signature of a member or authorized representative of a member

Martha McDowell

Typed or printed name of signee

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Filing Fee: \$25.00

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