

L10000092135

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TALLAHASSEE, FLORIDA

T WASHINGTON

DEC 21 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kelly and Sons Flooring 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:

Paul R. Kelly Sr.
Name of Person
Kelly and Sons Flooring LLC
Firm/Company
582 Baywood Dr N
Address
Dunedin FL 34698
City/State and Zip Code
Kimkelly02@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly Kelly at (727) 418 6603
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**

Kelly and Sons Flooring 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 9/1/2010 and assigned
Florida document number L10000092135

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)

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:

Paul R. Kelly SR.

New Registered Office Address:

582 Baywood Dr N.

Enter Florida street address

Dunedin

Florida

34698

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.

Paul R. Kelly Sr.

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>
MGRM	Kimberly A. Kelly	582 Baywood Dr N	<input type="checkbox"/> Add
		Dunedin FL 34698	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Paul R. Kelly JR	582 Baywood Dr N	<input type="checkbox"/> Add
		Dunedin FL 34698	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kevin A. Kelly	582 Baywood Dr N	<input type="checkbox"/> Add
		Dunedin FL 34698	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Paul R. Kelly SR	582 Baywood Dr N	<input checked="" type="checkbox"/> Add
		Dunedin FL 34698	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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JANUARY 11 2012

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

Paul R. Kelly SR. 100%

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CLERK OF SUPERIOR COURT
STATE OF CALIFORNIA

E. Effective date, if other than the date of filing: 12-8-16 (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 12-8-16, 2016.

Paul R Kelly Sr

Signature of a member or authorized representative of a member

PAUL R Kelly SR.

Typed or printed name of signee