

L10000092770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

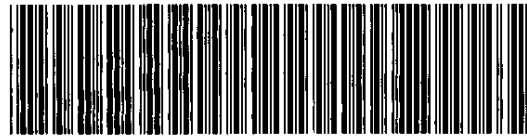
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800185149868

09/10/10--01014--028 **55.00

FILED
10 SEP 10 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

SEP 13 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: G & R 1, 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:

STEVE ROBERTSON
Name of Person

RWR
Firm/Company

15 HICKORY HILLS CIRCLE
Address

LITTLE ROCK, AR 72212
City/State and Zip Code

SRobert742@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEVE ROBERTSON at (501) 539-1171
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

Steven Robertson

15 Hickory Hills Circle
Little Rock, AR 72212
501-539-1171

September 7, 2010

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for \$55 to cover the filling changes to our LLC name and listed managers. If there are any questions please contact me at the above address and phone number.

Steve Robertson

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

G & R 1, 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 9/03/2010 and assigned
Florida document number 110000092770

FILED
10 SEP 10 PM 12:06
CLERK OF STATE
TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

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

RWR, 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)

1048 DARTFORD DR.

TARPON SPRINGS, FL. USA

34688

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15 HICKORY HILLS CIRCLE

LITTLE ROCK, AR 72212

USA.

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:

New Registered Office Address:

Enter Florida street address

, Florida

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	JOHN GIVENS	15 HICKORY HILLS CIRCLE LITTLE ROCK, AR 72212 USA	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	STEVE ROBERTSON	15 HICKORY HILLS CIRCLE LITTLE ROCK, AR 72212 USA	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	MARK ROBERTSON	15 HICKORY HILLS CIRCLE LITTLE ROCK, AR 72212 USA	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated Sept. 7, 2010

Steve Robertson

Signature of a member or authorized representative of a member

STEVE ROBERTSON

Typed or printed name of signee

FILED
SEP 10 PM 12:06
CLERK OF STATE
TALLAHASSEE, FLORIDA