

L10000 118259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

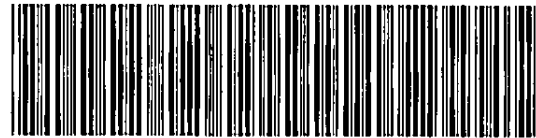
(Document Number)

Certified Copies ☒

Certificates of Status ☒

Special Instructions to Filing Officer:

Office Use Only



600343410446

04/24/20--01015--007 **60.00

S TALLENT

MAY 06 2020

2020 APR 24 PM 3:53

Handwritten signature

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RONALD L. ALLISON 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:

JANET A. ALLISON

Name of Person

Firm/Company

3905 WOODLAKE DRIVE

Address

BONITA SPRINGS, FL 34134

City/State and Zip Code

JATENNGOLF@COMCAST.NET

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

For further information concerning this matter, please call:

JANET A. ALLISON

239 450-3327
at ()
Area Code Daytime Telephone Number

Name of Person

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**

RONALD L. ALLISON 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 11/15/2010 and assigned
Florida document number L10000118259.

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:

JANET A. ALLISON

New Registered Office Address:

Enter Florida street address

City

, Florida

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.

Janet A. Allison
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>
MGR	RONALD L. ALLISON	3905 WOODLAKE DRIVE	<input type="checkbox"/> Add
		BONITA SPRINGS, FL 34134	<input checked="" type="checkbox"/> Remove
		(NOW DECEASED)	<input type="checkbox"/> Change
MGR	JANET A. ALLISON	3905 WOODLAKE DRIVE	<input checked="" type="checkbox"/> Add
		BONITA SPRINGS, FL 34134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	RONALD L. ALLISON	3905 WOODLAKE DRIVE	<input type="checkbox"/> Add
		BONITA SPRINGS, FL 34134	<input checked="" type="checkbox"/> Remove
		(NOW DECEASED)	<input type="checkbox"/> Change
MGRM	JANET A. ALLISON	3905 WOODLAKE DRIVE	<input checked="" type="checkbox"/> Add
		BONITA SPRINGS, FL 34134	<input 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.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be the date of the filing of the application with the U.S. Patent and Trademark Office.)

(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 match the date of filing, the filing is not effective.

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 APRIL 21, 2020

Janet A. Allison
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

JANET A. ALLISON

Typed or printed name of signee

Filing Fee: \$25.00