

L11000052517

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

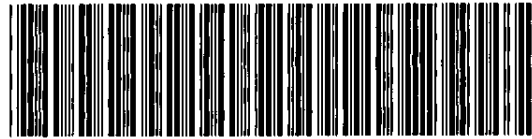
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600209672246

**B Tadock** NOV 21 2011

November 16, 2011

The Schoolyard, LLC  
c/o Heather A. Simmons  
339 83<sup>rd</sup> Ave NE  
St. Petersburg, FL 33702

Division of Corporations  
LLC Section  
P.O. Box 6327  
Tallahassee, FL 32314

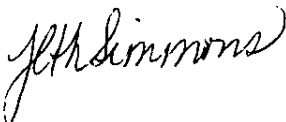
Re: Name Change for Document # L11000052517

This letter is to inform you that I have a name change due to marriage. Please update the articles of organization to reflect the new name and send a confirmation to our home address. Please find a copy of my marriage license attached.

Old Name: Heather Anne Watson  
New Name: Heather Anne Simmons

Thank you for your prompt attention to this matter. If there are any questions please feel free to call me.

Sincerely,

A handwritten signature in cursive script, appearing to read "H.A. Simmons".

Heather A. Simmons, MGRM  
The Schoolyard, LLC  
727-366-2351

Department of Health • Vital Statistics

STATE OF FLORIDA  
MARRIAGE RECORD

TYPE IN UPPER CASE

USE BLACK INK

This license not valid unless seal of Clerk,  
Circuit or County Court, appears thereon

(STATE FILE NUMBER)

2011 ML 1989130

(APPLICATION NUMBER)

APPLICATION TO MARRY			
1. GROOM'S NAME (First, Middle, Last) <b>TIMOTHY BLAIR SIMMONS</b>		2. DATE OF BIRTH (Month, Day, Year) [REDACTED]	
3a. RESIDENCE - CITY, TOWN, OR LOCATION <b>ST PETERSBURG</b>	3b. COUNTY <b>PINELLAS</b>	3c. STATE <b>FL</b>	4. BIRTHPLACE (State or Foreign Country) [REDACTED]
5a. BRIDE'S NAME (First, Middle, Last) <b>HEATHER ANNE WATSON</b>		5b. MAIDEN SURNAME (if different)	6. DATE OF BIRTH (Month, Day, Year) [REDACTED]
7a. RESIDENCE - CITY, TOWN, OR LOCATION <b>ST PETERSBURG</b>	7b. COUNTY <b>PINELLAS</b>	7c. STATE <b>FL</b>	8. Birthplace (State or Foreign Country) [REDACTED]
WE, THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.			
9. SIGNATURE OF GROOM (Sign full name using black ink) <i>Timothy Simmons</i>		10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) <b>09/15/2011</b>	
11. TITLE OF OFFICIAL <b>DEPUTY CLERK</b>		12. SIGNATURE OF OFFICIAL (Use black ink) <i>[Signature]</i>	
13. SIGNATURE OF BRIDE (Sign full name using black ink) <i>Heather Anne Watson</i>		14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) <b>09/15/2011</b>	
15. TITLE OF OFFICIAL <b>DEPUTY CLERK</b>		16. SIGNATURE OF OFFICIAL (Use black ink) <i>[Signature]</i>	
LICENSE TO MARRY			
AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.			
17. COUNTY ISSUING LICENSE <b>PINELLAS</b>	18. DATE LICENSE ISSUED <b>09/15/2011</b>	19a. DATE LICENSE EFFECTIVE <b>09/18/2011</b>	19b. EXPIRATION DATE <b>11/17/2011</b>
20a. SIGNATURE OF COURT CLERK OR JUDGE <i>[Signature]</i>		20b. TITLE <b>CLERK OF THE CIRCUIT COURT</b>	20c. BY D.C. <b>CMM</b>
CERTIFICATE OF MARRIAGE			
I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.			
21. DATE OF MARRIAGE [REDACTED]		22. CITY, TOWN, OR LOCATION OF MARRIAGE <b>St. Petersburg FL</b>	
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) <i>Sharon Ann Hammer</i>		23b. ADDRESS (for person performing ceremony) [REDACTED]	
23c. NAME AND ADDRESS OF PERSON PERFORMING CEREMONY (Use black ink) [REDACTED]		24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) [REDACTED]	
25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) [REDACTED]		[REDACTED]	



STATE OF FLORIDA - PINELLAS COUNTY  
I hereby certify that the foregoing is a true  
copy as the same appears among the files  
and records of this court.

This day of

**OCT 25 2011**

KEN BURKE  
Clerk of Circuit Court

By: *[Signature]*  
Deputy Clerk

SCAN CONTROL BATCH COVER  
SHEET

Examiner: N. Culligan

Date Processed: 11/21/11

Scanner & Date Scanned:

\_\_\_\_\_