

L110000 59425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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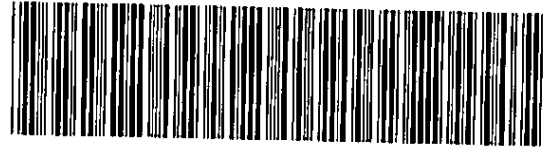
(Business Entity Name)

(Document Number)

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2018 DEC -7 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FL

UTS
12-12-18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JOHN C. HARRIS, INC. - SHELVA, LLC
Name of Limited Liability Company

Our Articles of Incorporation and Bylaws are submitted for filing.

For attention in correspondence concerning this matter to the following:

JOHN C. HARRIS, INC. - SHELVA, LLC

JOHN C. HARRIS
Name of Person

JOHN C. HARRIS, INC. - SHELVA, LLC
Firm Company

1000 10th St. S.W. ALBUQUERQUE, NM 87102
Address

505 ALBUQUERQUE 16 08101
City State and Zip Code

1000 10th St. S.W.
Mailing Address (to be used for future annual report notification)

For other information concerning this matter, please call:

505 ALBUQUERQUE
Area Code City

505 261-1616
Area Code Daytime Telephone Number

PLEASE CHECK EITHER BOX BELOW:

☒ \$50.00 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
Clifton Building
Tallahassee, FL 32301

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

FILED

2018 DEC -7 PM 2:35

001 James W. McCall SECRETARY OF STATE
(Name of the Limited Liability Company as it now appears on our records) TALLAHASSEE, FL
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2/17/2011 and assigned
Florida document number 1100002425

This amendment is submitted to amend the following:

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

The name must be differentiable 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

James W. McCall

New Registered Office Address

1120 Lakeview Road
Enter Florida street address

TALLAHASSEE
City

Florida

32307
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 required 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.

James W. McCall
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:

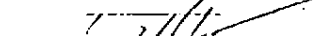
MGR – Manager
 AMBR – Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Change

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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.

Dated 11/29/2018



Signature of a member or authorized representative of a member

Deborah A. K. [unclear]

Typed or printed name of signee