

L110000059763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

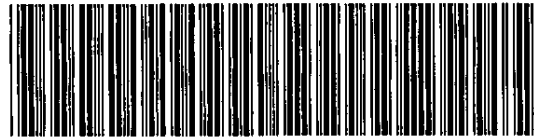
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16 DEC 12 PM 3:30
CLERK OF COURT
TALLAHASSEE, FLORIDA

DEC 13 2016

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D & S CROSSROADS, 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:

DIANE V. KUENZEL, ESQ.

Name of Person

KUENZEL LAW, P.A.

Firm/Company

4111 LAND O LAKES BOULEVARD, SUITE 302C

Address

LAND O LAKES, FL 34639

City/State and Zip Code

LAKERLAW@AOL.COM

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

For further information concerning this matter, please call:

SUSAN STATON

813

679-0324

at ()

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**

D & S CROSSROADS, 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 03/14/2014 and assigned
Florida document number L11000059763

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: _____

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.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

☐ Change
 16 DEC 12 PM 3630
☐ Add
☐ Remove
☐ Change
 ALLIANCE, FLORIDA
 ALLIANCE, FLORIDA

BILL OF SALE OF MEMBERSHIP INTERESTS IN
D & S CROSSROADS, LLC

The undersigned, DEBRA GRANATO, sold the following membership interests in the LLC to SUSAN STATON, the sole remaining member/manager of the LLC in exchange for the following amounts:

Membership Interests:	Value:
Fifty Percent (50%) of the LLC Interest	\$60,000.00

As the sole remaining member/manager of the LLC, SUSAN STATON, agrees to take full responsibility of the previous member's duties as a member in the named LLC.

The LLC membership interest is sold pursuant to a separate Sale of LLC Interest Agreement. The LLC is free of any encumbrances.

Total value: \$60,000.00

Total membership interest percentage: 50%

Seller Name:	Seller Signature:	Date:
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DEBRA GRANATO	<u>Debra Granato</u>	<u>12/8/16</u>
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** Failure to have all current members sign this agreement granting new owner full membership benefits does not grant new member full benefits.

Buyer Name:	Buyer Signature:	Date:
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SUSAN STATON	<u>Susan Staton</u>	<u>12-8-16</u>
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All current members authorize the sale of the membership interests to the named buyer in this agreement and agree to grant full member benefits to the new owner of the membership interest.

Current member(s):	Current member(s) signature:	Date:
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DEBRA GRANATO	<u>Debra Granato</u>	<u>12/8/16</u>
SUSAN STATON	<u>Susan Staton</u>	<u>12-18-16</u> <u>12/8/16</u> XX

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

16 DEC 12 PM 8:30
FEDERAL BUREAU OF INVESTIGATION
ALLAHSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (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

2016

10/8, 2016
Debra Granato

Signature of a member or authorized representative of a member

DEBRA GRANATO

Typed or printed name of signee