

L11000066130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

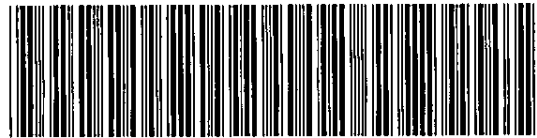
(Business Entity Name)

(Document Number)

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2015 AUG 10 AM 11:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
AUG 12 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SW FINANCIAL & MULTI-SERVICES, 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:

Sohanne Weston-Moore

Name of Person

SW FINANCIAL & MULTI-SERVICES, LLC

Firm/Company

6255 MINTON ROAD NE

Address

PALM BAY FLORIDA 32907

City/State and Zip Code

SWF3085@GMAIL.COM

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

For further information concerning this matter, please call:

Sohanne Weston-Moore

754 422-1640

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building

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TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SWN Financial & Multi-Services, L.L.C.

(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 06/07/2011 and assigned
Florida document number L11000066130

This amendment is submitted to amend the following:

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

SW Financial & Multi-Services, LLC

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:

6255 Minton Road, NE

(Principal office address MUST BE A STREET ADDRESS)

Palm Bay, FL 32907

Enter new mailing address, if applicable:

6255 Minton Road, NE

(Mailing address MAY BE A POST OFFICE BOX)

Palm Bay, FL 32907

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:

Sohanne Weston-Moore

New Registered Office Address:

6255 Minton Road, NE

Enter Florida street address

Palm Bay

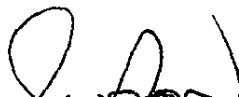
City

Florida 32907

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.



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TALLAHASSEE, FLORIDA

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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
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_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add

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

I JUST NEED THE NAME UPDATED AND THE ADDRESS CHANGED

WHEN I DID IT THE LAST TIME I USED MY PEN AND IT WASN'T TYPED AND SO IT WAS

INCORRECTLY RECORDED AS SWN FINANCIAL INSTEAD OF SW FINANCIAL.

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

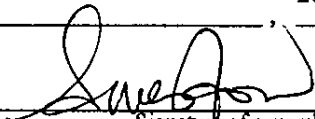
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 August 4th

2015



Signature of a member or authorized representative of a member

Sohanne Weston-Moore