

211000093630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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17 FEB 17 PM 2:02

01/17/17--01013--015 **25.00

FEB 21 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4 Stars painting & Waterproofing 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:

Andreanna Engelmeier
Name of Person

Firm/Company

3559 Bess Nook Rd.
Address

Bonifay, FL 32435
City/State and Zip Code

andreanna@ yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephen Jackson at (850) 240-9011
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 3, 2017

ANNDREANNA ENGELMEIER
3559 BESSNOOK RD
BONIFAY, FL 32425

SUBJECT: 4 STARS PAINTING & WATERPROOFING LLC
Ref. Number: L11000093630

RECEIVED
2017 FEB 17 PM 12:23
FALL ANNUAL REPORT

We have received your document for 4 STARS PAINTING & WATERPROOFING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 417A00002228

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DIVISION OF CORPORATIONS
17 FEB 17 PM 2:02



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 19, 2017

ANNDREANNA ENGLEMEIER
3559 BESSNOOK RD
BONIFAY, FL 32425

SUBJECT: 4 STARS PAINTING & WATERPROOFING LLC
Ref. Number: L11000093630

RECEIVED
2017 FEB - 1 PM 2:17
TALLAHASSEE, FLORIDA

We have received your document for 4 STARS PAINTING & WATERPROOFING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's date of incorporation/organization must be listed in the document.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Part 5 (b) is incomplete. (New registered agent)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 317A00001187

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

4 Stars painting & water proofing 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 8-15-2011 and assigned Florida document number L11000093630

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)

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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:

Stephen B. Jackson

New Registered Office Address:

Enter Florida street address

_____, Florida

City

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.

Stephen B. Jackson
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>
<u>mmy</u>	<u>Andreana Engelman</u>	<u>3559 Bess Street Rd</u>	<input type="checkbox"/> Add
		<u>Bonifay, fl 32425</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>mark</u>	<u>Mark Jackson</u>	<u>P.O. Box 529</u>	<input type="checkbox"/> Add
		<u>Vernon, FL 32462</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>registered agent</u> <u>mmy</u>	<u>Bobby Berryfull</u>	<u>p.o. box 529</u>	<input type="checkbox"/> Add
		<u>Vernon, FL 32462</u>	<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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17 FEB 17 PM 2:01

[illegible]

(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)

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.

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Stephen B. Jackson
Typed or printed name

Typed or printed name of signee

FILED
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OFFICE OF REGISTRATION
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