

L11000117330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

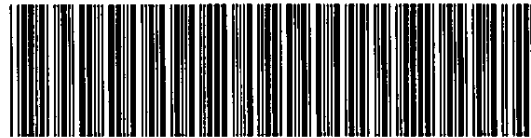
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100292325591

12/01/16--01014--008 **25.00

FILED
16 DEC - 1 PM 3:49
TAL BARRISSE, FLORIDA

T WASHINGTON

DEC 02 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JPBRYANT AND ASSOCIATES, 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:

LYNN ADAMS

Name of Person

BEACHES TAX SERVICES OF N.E. FLORIDA, INC.

Firm/Company

2768 STATE ROAD A1A # 308

Address

JACKSONVILLE, FL 32233-2885

City/State and Zip Code

beachestaxservices@comcast.net

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

For further information concerning this matter, please call:

LYNN ADAMS

904 270-2876
at ()
Area Code Daytime Telephone Number

Name of Person

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

FILED
16 DEC + 1 PM 9:49
and assigned

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

134 HIDDEN PALMS LANE
PONTE VEDRA BEACH, FL 32082

134 HIDDEN PALMS LANE
PONTE VEDRA BEACH, FL 32082

Zip Code

Page 1 of 3

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>
AMBR	KENDALL R. BRYANT	101 CLUB FOREST PONTE <i>Vedra Beach</i> 32082	☒ Add ☐ Remove ☐ Change
AMBR	SANNA E. BRYANT	533 SEAL PLACE ATLANTA GA 30308	☒ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change

FILED
 DEC 1 1993
 PHOENIX
 ARIZONA
 U.S. DEPT. OF JUSTICE

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

FILED
16 DEC -1 PM 3:49
U.S. DEPT. OF JUSTICE
FBI - TAMPA

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 _____, _____

Signature of a member or authorized representative of a

JOSEPH P BRYANT -MANAGING MEMBER

Typed or printed name of signee