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**EXAMINER** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2012

MONTGOMERY MARKEL 1131 GOULD ST CLEARWATER, FL 33756

SUBJECT: SOUTHERN STYLE CUSTOMS LLC

Ref. Number: L12000004397

We have received your document for SOUTHERN STYLE CUSTOMS LLC and your check(s) totaling \$30.00. 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.

Tammi Cline Regulatory Specialist II

Letter Number: 012A0001124

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## **COVER LETTER**

	gistration Section vision of Corporations
SUBJECT:	_ Southern Style Custom LLC  Name of Limited Liability Company
The encloses	d Articles of Amendment and fee(s) are submitted for filing.
Please return	n all correspondence concerning this matter to the following:
	Montamery Markel  Name of Person  MARKEL LLC  Firm/Company  1131 Govld St. C  Address  Clearwater FL 33756  City/State and Zip Code
For further i	E-mail address: (to be used for future annual report notification)  If the second seco
Enclosed is:	Name of Person  Area Code & Daytime Telephone Number  To a check for the following amount:
\$25.00 F	
	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

20022023

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ed Liability Company as it now appea (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_ Florida document number <u>L1260000</u> 43 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 end with 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 608, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title **Type of Action** Name Address MERM MARKELLIC MERM Montgonery MARKEL Add Remove □ Add Remove ☐ Add ☐ Remove ☐ Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Page 2 of 2

Filing Fee: \$25.00