## \*112000011195

(Requestor's Name)		
(Address)		
(Address)		
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
	<u>.                                    </u>	

Office Use Only



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K.SALY EXAMINER JUL - 6 2015

## **COVER LETTER**

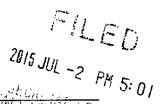
	Registration Sec Division of Corp			
\$	ELLEN ME	GGINSON, LLC		
SUBJEC	Т:	Name of Lim	ited Liability Company	——————————————————————————————————————
		amendment and fee(s) are sub-	-	
		ELLEN MEGGINSON		
			Name of Person	
		ELLEN MEGGINSON, L	LC	
			Firm/Company	
		2000 King Arthur Circle		
			Address	
		Maitland, FL 32751		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	···········
		CMEGGINSON@GMAIL.		
		E-mail address: (	to be used for future annual report notifi	cation)
For furthe	er information co	ncerning this matter, please co	all:	
Christopl	her Megginson		407 310-0410 at ( )	
	Name of	Person		Telephone Number
Enclosed	is a check for the	e following amount:		
<b>□ \$</b> 25.0	0 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 ARTICLES OF ORGANIZATION **OF**



Ellen Megginson, 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  $\frac{01/24/2012}{1}$ and assigned Florida document number \_L12000011195 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 "LLC." 2000 KING ARTHUR CIRCLE Enter new principal offices address, if applicable: MAITLAND, FL 32751 (Principal office address MUST BE A STREET ADDRESS) N/A 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

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, 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

٩

<u>Title</u>	Name	Address	Type of Action
MGR	CHRISTOPHER MEGGINSON	2000 KING ARTHUR CIRCLE, M  ■	Add
			□ Remove
			☐ Change
			□ Remove
		<del>.</del>	Gehange Add
			Remove \
			Change
			Add
			□ Remove
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		Remove	
			☐ Change

Effective date, if other than the date of filing:  (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 603.0 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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 The 90th day after the record is filed.  Dated  Lily 17  2015  Signature of a member or authorized representative of a member	N/A		
Effective date, if other than the date of filing:	· · · · · · · · · · · · · · · · · · ·	•	
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			an effective time, at 12:01 a.m. on the earlier of
	Dated July	17 2015	
Signature of a member or authorized representative of a member	_		
		Signature of a member or authoriz	ted representative of a member

Page 3 of 3

Filing Fee: \$25.00