L120000131568

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SERGIANN OF STATE
TAIL AHASSEE, FLORIDA

N. Gulligan JUL 13 2019

COVER LETTER

TQ: Registration Section Division of Corporations	
SUBJECT: LITTLE FOOT INTEGRATIONS, 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:	
TOROAN SPAGNOLO Name of Person	
LITTLE FOOT INTEGRATIONS, LLC Firm/Company	
1/585 SUNDWA SPRINGS TRAIL Address	
BRYCEVILLE, FLORINA 3 2009 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
TORDAN SPAGNOLO at (904) 400-0865 Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	ed)

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



June 19, 2012

JORDAN SPAGNOLO 11585 SUNOWA SPRINGS TRAIL BRYCEVILLE, FL 32009

SUBJECT: LITTLE FOOT INTEGRATIONS, LLC

Ref. Number: L12000021568

We have received your document for LITTLE FOOT INTEGRATIONS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$30.00.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 012A00016963

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION QF

FILED

12 UH 12 AM 0- 25

LITTLE FOOT 1	UTEGRA	TIONS . LL	C. Charles	OF STATE
LITTLE FOOT II (Name of the Limited Lia (A Flo	bility Company s rida Limited Liab	is it now appears on o	ur records HASSE	E, FLORIDA
The Articles of Organization for this Limited Liabil	ity Company we	re filed on	4/12	_ and assigned
Florida document number <u>L120000 215</u>	68 .	·		
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	limited liability	y company here:		
The new name must be distinguishable and end with the		10 CHANG	Σ	
"L.L.C."	e words "Limited	Liability Company," th	ne designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable	:	NO CHA	NGE	
(Principal office address MUST BE A STREET A	DDRESS) _			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX		NO CHA	NGE	
B. If amending the registered agent and/or registered agent and/or the new registered office	egistered office address here:	address on our re	cords, enter the	name of the new
Name of New Registered Agent:	JORDAN	SPAGNOL	<u> </u>	
			orida street addres.	S
	BRYCENI	LLE_ ity	, Florida <u> </u>	Z O O 9 Zip Code
New Registered Agent's Signature, if changing Regis		•		•

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.

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 = Ma MGRM = N	nager Managing Member			
<u>Title</u>	<u>Name</u>	Address		Type of Action
MGRM	SCOTT MORRISON SE.	2253 PALM ATLANTIC BE	LANDING DE ACH, FLORIDA 32233	Add Remove
				Add Remove
				Add Remove
				Add Remove
				Add Remove
				Add Remove
D. If amen	ding any other information, enter change(s		_	
_	JORDAN SPAGNOLO		NERSHIP	_
····			O MGRM	<u>;</u> ; ₹
	MARY PAUL		O MGRM	
	VAUGEN PAUL		% MGRM	. 12
_	SCOTT MORRISON	5 9	% MGRM	FILED 12 AT
Dated	JUNE 4 , 201	2		ED AM 9: 25 Off STATE
	Ocade n Superior		ĐÀ	m U i.
	Signature of a member of	authorized representative	of a member	····
	Tocsav 57 Typed or	AGNOLO printed name of signee		

Page 2 of 2

Filing Fee: \$25.00