L120000050806

_____
(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:

A. LUNT

OCT 23 2012

EXAMINER

Office Use Only

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2012 OCT 22 PM 3 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

V and E Williams, LLC

SUBJECT: _____
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:

Hazel Hamilton
Name of Person

V and E Williams, LLC
Firm/Company

8221 Granada Blvd
Address

Orlando, FL 32836
City/State and Zip Code

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

For further information concerning this matter, please call:

Marcia Richardson _____ at (__407__) _____ **600-5279** _____
Name of Person   Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☑ ❑ $25.00 Filing Fee   ❑ $30.00 Filing Fee &   ❑ $55.00 Filing Fee &   ❑ $60.00 Filing Fee,
                              Certificate of Status   Certified Copy   Certificate of Status &
                                                           (additional copy is enclosed)   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
TO
ARTICLES OF ORGANIZATION
OF

V and E Williams, LLC

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

04/13/2012

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
L12000050806

Florida document number _____ .

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 new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

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 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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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:
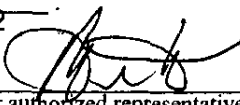
MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	Jennifer Hamilton	3900 Millenia Blvd Orlando, FL 32839	☑ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

_____

_____

_____

_____

_____

Dated _____ October 18 _____, 2012

Signature of a member or authorized representative of a member

Marcia Richardson

Typed or printed name of signee

Page 2 of 2

Filing Fee: $25.00