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(Re	questor's Name)	
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(Do	cument Number)	
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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 3/4/20

NAME: SITE READY LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co			
Site Rea	dy. LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
1	Denise	Annunciala	
		Name of Person	
:	Velawo	city Legal Support Services	
		Firm/Company	
	801 Wa	ater Street, Ste. 107	
		Address	
i	Framin	gham, MA 01701	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
		at ()	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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 Addre Registration Division of C	Section Corporations	Street Address: Registration Sec Division of Cor	porations
P.O. Box 632	27	The Centre of T	`allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SITE R	EADY, LLC	
(Name of the Lin	ited Linbility Com (A Florida Limite	pany as it now appears on ou d Liability Company)	r records.)
The Articles of Organization for this Limited Florida document number L12000067988	Liability Compar	ny were filed on May 18. 2	2012 and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited lia	ability company here:	
Clarke & McCrory Legacy, LLC			
The new name must be distinguishable and contain the	words "Limited Lia	bility Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	no change	
Principal office address MUST BE A STRE			
			2020 Í
Enter new mailing address, if applicable:		no change	TI TI
(Mailing address MAY BE A POST OFFICE BOX)			
			- 3
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office	e address on our records	, enter the name of the new regist
Name of New Registered Agent:	no change		
New Registered Office Address:			
		Enter Florida stree	t address
			Florida
		Ciny	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 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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Type of Action
		no change	
			□Remove
			□Change
.,			
•			□ Remove
			Change
			
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fan effed <u>Note:</u> I		e specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 k does not meet the applicable statutory filing requirements, this date will not be listed as
e record d is file		date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated _	February 28	2020
		Ryan Clarke
	Si	gnature of a member or authorized representative of a member

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