

L120000126149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

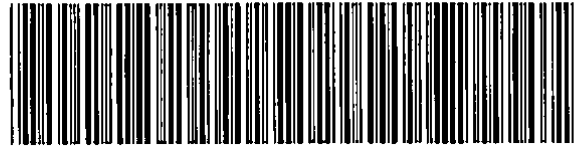
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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29th

Office Use Only



900331272849

07/03/19--11:11--11:11

LLC  
Amend  
9/3/19  
DC  
19 AUG 29 PM 2:49  
CLERK OF STATE  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 16, 2019

KELLY GONWAY MIX  
P.O. BOX 3464  
MILTON, FL 32572

SUBJECT: SEM FAMILY HOLDINGS, LLC  
Ref. Number: L12000126149

We have received your document for SEM FAMILY HOLDINGS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to list the new registered agent information in part B of the form. If you're not changing the registered agent and/or address please submit the enclosed amendment form for all other changes.

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 019A00014407

August 26, 2019

Irene Albritton,  
Regulatory Specialist II  
Ref. Letter Number: 019A00014407

Ms. Albritton,

In response to your letter of July 61, 2019 (attached), please find a revised Articles of Amendment for SEM FAMILY HOLDINGS, LLC (L12000126149).

In summary, our intent is to:

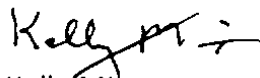
1. Change the office and mailing address
2. Add my name as manager.

Please note, we do not intend to change the registered agent.

I have enclosed a check for \$25 to cover the filing fee.

Thank you for your assistance and please do not hesitate to call me or write with any further questions.

Sincerely

  
Kelly M. M.  
678 347-5107

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SEM FAMILY HOLDINGS, 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:

KELLY CONWAY MIX  
Name of Person

SEM FAMILY HOLDINGS, LLC  
Firm/Company

PO Box 3464  
Address

MILTON, FL 32572  
City/State and Zip Code

Kmix642@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHARLES G. CHRISTENSEN at (404) 421-5587  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED  
DIVISION OF CORPORATE  
19 AUG 29 PM 2:41

SEM FAMILY HOLDINGS, 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 10/01/2012 and assigned Florida document number L12000126149.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1190 CHRISTMAS TREE RD  
MILTON, FL 32570

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 3464  
MILTON, FL 32572

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 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>          | <u>Type of Action</u>                   |
|--------------|-------------------------|-------------------------|---|
| <u>MGR</u>   | <u>KELLY CONWAY MIX</u> | <u>PO Box 3464</u>      | <input checked="" type="checkbox"/> Add |
|              |                         | <u>MILTON, FL 32572</u> | <input type="checkbox"/> Remove         |
|              |                         |                         | <input type="checkbox"/> Change         |
|              |                         |                         | <input type="checkbox"/> Add            |
|              |                         |                         | <input type="checkbox"/> Remove         |
|              |                         |                         | <input type="checkbox"/> Change         |
|              |                         |                         | <input type="checkbox"/> Add            |
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|              |                         |                         | <input type="checkbox"/> Change         |

[illegible]

(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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Kelly Conway Mix  
Signature of a member or authorized representative of a member

KELLY CONWAY MIX  
Typed or printed name of signee