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M. MILLIGAN EXAMINER

JUN - 2 2015

COVER LETTER

TO: Registration Section , Division of Corporations

orvision of Corporations

15 MAY -1 AH 10: 00

SUBJECT:

Stubbs & McQuillan Cattle, LLC-

Name of Limited Liability Company

DUREAU OF COMMERCIAL INFORMATIONS SERVICES

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Lawrence V. Stubbs	•	
		Name of Person	
	Stubbs & McQuillan	cattle , LLC	
	Firm/Company		
	501 West Coker Ro	ad	
		Address	
	Ft. Pierce FL. 34945	5	
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	stuboutelectric@aol.	com	
	E-mail address: (to be used for future annual report notifica	tion)
For further information c	oncerning this matter, please c	all:	
Lawrence Stubbs		772 201-7316	
Name o	f Person		elephone Number
Enclosed is a check for the	ne 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 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 4, 2015

STUBBS & MCQUILLAN CATTLE, LLC ATTN: LAWRENCE V. STUBBS 501 WEST COKER ROAD FT. PIERCE, FL 34945

SUBJECT: STUBBS & MCQUILLAN CATTLE, LLC

Ref. Number: L12000150857

We have received your document for STUBBS & MCQUILLAN CATTLE, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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.

Letter Number: 715A00009104

Michelle Milligan Senior Section Administrator HECEIVED

CRETARY OF STATE

CRETARY OF STATE

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION OF

5 15 15 (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 December 3/2012 and assigned Florida document number L12000150857 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Stubbs & Adams Cattle, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Lawrence V. Stubbs Enter new principal offices address, if applicable: 501 West Coker Road (Principal office address MUST BE A STREET ADDRESS) Ft. Pierce FL. 34945 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

New Registered Agent's Signature, if changing Registered Agent:

Stubbs & McQuillan Cattle, LLC

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

Zip Code

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	William H. McQuillan Jr.	3322 SE River Vista Drive	
		Port Saint Lucie FL. 34952	Remove
		<u> </u>	
MGR	Brett J. Adams	410 North Brocksmith Road	Add
		Fort Pierce FL 34945	□ Remove
			
			Add
			Remove
			Add
			Remove
			☐ Remove
			Add
			☐ Remove

If amending any other information, ϵ	enter change(s) here: (Attach additional sheets, if necessar
the date this document is filed by the Florida D	of filing:(optional rior to date of receipt or filed date and cannot be more than 90 days after repartment of State)
Dated April 24	2015
Land	
Signat	ure of a member or authorized representative of a member
Lawrence V. Stubbs	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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