

L130000035404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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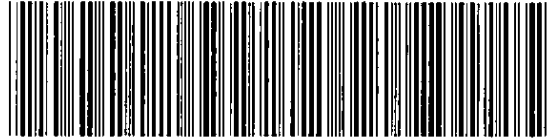
(Business Entity Name)

(Document Number)

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LLC amend

10/16/24--01012--016 \*\*25.00

2024 OCT 16 PM 12 25  
STATE OF MISSISSIPPI

FILED

A. RAMSEY

NOV 4 2024

# TOBAYGO LAW

AN ASSOCIATION OF PROFESSIONAL CORPORATIONS

ANGELA D. TOBAYGO, ESQ.  
SEAN W. TOBAYGO, ESQ.  
DANIEL W. YUTER, ESQ.

[www.sarasotafamilyattorneys.com](http://www.sarasotafamilyattorneys.com)

October 4, 2024

*Via Certified Mail 7015 0640 0007 4152 5582*

Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Griffin Mobile Welding Fabricator LLC  
Document # L13000035404

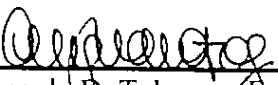
To Whom It May Concern:

Enclosed please find the following related to Griffin Mobile Welding Fabricator LLC :

1. Cover letter to the Division of Corporations;
2. Articles of Amendment to Articles of Organization of Griffin Mobile Welding Fabricator LLC, specifically the change of the Registered Agent (Section B) and removing Christine Griffin as the VP, Secretary/Treasurer (Section D), signed by the MGRM and new Registered Agent, Edward Griffin.
3. Check for \$25.00 for the filing fee related to this matter.

Thank you for assisting me with these matters and please contact my office with any issues regarding this correspondence or the Articles of Amendment.

Sincerely,

  
Angela D. Tobaygo, Esq.  
FBN: 0706981  
1266 1<sup>st</sup> Street, Suite 9  
Sarasota FL, 34236  
Phone: 941-404-8908  
Fax: 941-366-4333  
[angela@tobaygolaw.com](mailto:angela@tobaygolaw.com)

Enclosures; Check #1466

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Griffin Mobile Welding Fabricator 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:

Edward Griffin

\_\_\_\_\_  
Name of Person

Griffin Mobile Welding Fabricator LLC

\_\_\_\_\_  
Firm/Company

8253 Webber Road

\_\_\_\_\_  
Address

Sarasota, Florida, 34240

\_\_\_\_\_  
City/State and Zip Code

fasteddie201@hotmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward Griffin

941

809-8583

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

**2024 OCT 16 PM 12 25**

GRIFFIN MOBILE WELDING FABRICATOR LLC

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

CLERK OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/08/2013 and assigned  
Florida document number L13000035404.

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)**

**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:

EDWARD GRIFFIN

New Registered Office Address:

8253 WEBBER ROAD

Enter Florida street address

SARASOTA

City

Florida 34240

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**

[illegible]

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

\*

Please remove any/all titles of VP, Secretary/Treasurer for :

CHRISTINE GRIFFIN, 8253 Webber Road, Sarasota, Florida, 34240

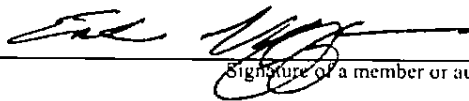
**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated October 2, 2024.



Signature of a member or authorized representative of a member

EDWARD GRIFFIN

Typed or printed name of signee

**Filing Fee: \$25.00**