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COVER LETTER

TO: Registration Section
Division of Corporations

Sharon McBride Servpro of North Pensacola

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:

Sharon McBride

Name of Person

Servpro of North Pensacola

Firm/Company

698 E. Heinberg Street

Address

Pensacola, Florida 32502

City/State and Zip Code

servpro10170@gccoxmail.com

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

For further information concerning this matter, please call:

Brantley or Sharon McBride at (850) 466-3076

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sharon McBride Servpro of (Name of the Limited I			our records.)		
The Articles of Organization for this Limited Lia Florida document number <u>13-385</u>	ability Company	were filed on March	14, 2013	and assigned	
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabi	lity company here:			
Sharon R McBride Restoration LLC					
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ed Liability Company,"	the designation "LLC"	or the abbrevia	_ tion
Enter new principal offices address, if applica	ble:	SAME			_
(Principal office address MUST BE A STREET ADDRESS)			200 200 200	2013	_
				<u> </u>	
Enter new mailing address, if applicable:		SAME		6 - 8 - 8 - 8 - 8 - 8 - 8 - 8 - 8 - 8 -	ri Ti
(Mailing address MAY BE A POST OFFICE BOX)				理。	_(
				<u> </u>	_
B. If amending the registered agent and/o registered agent and/or the new registered off			records, enter the	name of the r	<u>1ew</u>
Name of New Registered Agent:	same				
New Registered Office Address:	same				
_		Enter Florida street address			
	Pensacola		, Florida <u>325</u> 0	2	_
		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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Type of Action Address <u>Title</u> <u>Name</u> Remove Remove Remove Add Remove Remove

Ifar	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	All we are doing is changing the name. We can not have "servpro" in the name.
•	
	<u> </u>
tod.	68/06/2013
iea _	08/08/2013
	\mathcal{L}
	Signature of a member or authorized representative of a member
	Sharon R MCBRIDE
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00