11300052985

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only



700300659927

06/22/17==01024--017 **50.00

17 JUN 22 PM 2: 22 DIVISION OF CORF-GRATIONS

O SHAMONS JUN 2 6 2017

COVER LETTER

	Registration Sec Division of Corp			
SUD HEAT		and Fitle, LLC.		
SUBJEC	l':		ited Liability Company	
The enclos	sed Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please rett	arn all correspoi	ndence concerning this matter	to the following:	
		Janice Sapp		howing: me of Person mn/Company Address
			Name of Person	
		Panhandle Land Title, LLG		
			Firm/Company	
		124 E. Virginia Ave		
			Address	
		Bomfay, Fl 32425		
		·	City/State and Zip Code	· ·
		panhandlelandtitle@gmail.		
For furthe	r information co	n-mail address: (·	ucation)
Janice Sa	pp		850 547-2025	
	Name of	Person	at () Area Code Daytim	e Telephone Number
Enclosed i	s a check for th	e following amount:		
□ \$25.00) Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional 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

Panhandle Land Title, LLC			
(Name of the Lim	ited Liability Company (A Florida Umited Ual	as it now appears on our of ulity Company)	'ecords.)
The Articles of Organization for this Limited I	Liability Company we	ere filed on 04/10/2013	and assigned
Florida document number 1.13000052985	······································		
This amendment is submitted to amend the fol	lowing:		
Florida document number 1.13000052985 This amendment is submitted to amend the fol A. If amending name, enter the new name of the new name of the new name must be distinguishable and contain the Enter new principal offices address, if applia (Principal office address MUST BE A STRE) Enter new mailing address, if applicable:	of the limited liabilit	y company here:	6) 4
The name name and the distinguid babbe and contain the	war to of instruct Linkshire	Company "the Jesignation	"I I t " are thus alsheave an "E t C "
The flew maine mine of distinguismant and commandie	words Thanked Flathing	Company. the designation	2. F
Enter new principal offices address, it appli	cable: _		<u> </u>
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	· <u></u>	
			· · · · · · · · · · · · · · · · · · ·
	-		<u> </u>
Enter new mailing address, if applicable:	-		
(Mailing address MAY BE A POST OFFICE			
	-		.
B. If amending the registered agent and	llan mariotamal affia	o addrawe an aur ra	name antar the name of the name
registered agent and/or the new registered a	• •	e address on our re	cords, enter the name of the new
registered agene and/or the new registered v	mee address nere.		
Name of New Registered Agent:	Michael L. Sapp		
	124 E. Virginia		
New Registered Office Address:		Enter Florida street	address
		imer randameer	
	Bonifay		Florida <u>32425</u>
		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>	Name	Address	Type of Action
MGRM	Emory R. Estes	612 Rustin Drive, Chipley, FL 324.	
			■ Remove
			Change
MGRM	Joani C. Rogers	1767-A Houston Road, Chipley, FI	= Add
			Remove
			□ Change
			
			☐ Remove
			Significant Change T
····			Thange Thange PH of Change Change
			
			🛘 Remove
			□ Change
			
			□ Remove
			Change

	_					
						
						17 JUN 22 PH 2: 22
					104	JUN 22 PH 7
					of c	72
	··- <u>·</u>					- 2
	<u> </u>				<u> </u>	_;_;_
						-
		<u> </u>				
Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this blaceument's effective date on the D	st be specific and o ock does not me	cannot be prior to eet the applical	o date of filing or r	more than 90 days at ng requirements, t	ter filing.) Pursuant to	605,0207 (listed as th
e record specifies a delayed		ate, but not	an effective	time, at 12:01	a.m. on the ea	arlier of:
The 90th day after the rec						
·		2017				
The 90th day after the rec		2017	<u></u> ·			

Page 3 of 3

Filing Fee: \$25.00