

L13000083051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

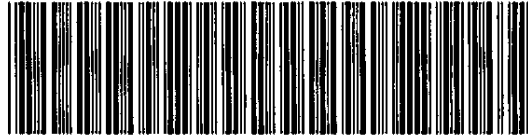
(Business Entity Name)

(Document Number)

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FILED
15 MAY -7 PM 1: 58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED MAY 15 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Todd Sanders, 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:

Marlene Sanders
Name of Person

Marlene Sanders, LLC
Firm/Company

128 Mill Cove Ln.
Address

Ponte Vedra Beach, FL 32082
City/State and Zip Code

mgsanders@comcast.net
E-mail Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marlene Sanders at (904) 392-6168
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 27, 2015

MARLENE SANDERS
128 MILL COVE LN
PONTE VEDRA BEACH, FL 32082

SUBJECT: TODD SANDERS, LLC
Ref. Number: L13000083051

REGISTRATION
INFORMATION SERVICES

15 MAY -7 AM 10:00

We have received your document for TODD SANDERS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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.

Tim Burch
Regulatory Specialist II

Letter Number: 115A00008513

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Todd Sanders, 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 June 7, 2013 and assigned
Florida document number L13000083051.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Marlene Sanders, LLC

The new name must be distinguishable and end with 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)

128 Mill Cove Ln.
Ponte Vedra Beach, FL 32082

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

128 Mill Cove Ln.
Ponte Vedra Beach, FL 32082

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:

Marlene Sanders

New Registered Office Address:

128 Mill Cove Ln.

Enter Florida street address

Ponte Vedra Beach, Florida 32082

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.

Marlene G. Sanders

If Changing Registered Agent, Signature of New Registered Agent

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15 MAY -7 PM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
	<u>Mark Young, PA</u>	<u>12086 Ft. Caroline Rd.</u>	<input type="checkbox"/> Add
		<u>Unit 202</u>	<input checked="" type="checkbox"/> Remove
		<u>Jacksonville, FL 32225</u>	
	<u>Todd Sanders</u>	<u>12086 Ft. Caroline Rd.</u>	<input type="checkbox"/> Add
		<u>Jacksonville, FL 32225</u>	<input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>Marlene Sanders</u>	<u>128 Mill Cove Ln.</u>	<input checked="" type="checkbox"/> Add
		<u>Ponte Vedra Beach, FL</u>	<input type="checkbox"/> Remove
		<u>32082</u>	
<u>AMBR</u>	<u>Todd Sanders</u>	<u>128 Mill Cove Ln.</u>	<input checked="" type="checkbox"/> Add
		<u>Ponte Vedra Beach, FL</u>	<input type="checkbox"/> Remove
		<u>32082</u>	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

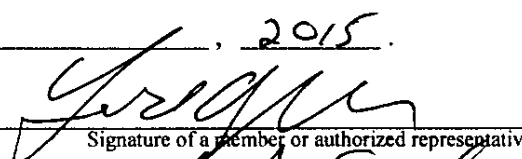
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 TALLAHASSEE, FLORIDA

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 4/7, 2015.



Signature of a member or authorized representative of a member

Todd A. Sanders

Typed or printed name of signee

15 MAY -7 PM 1:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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