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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

FROG AND TOAD, 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:

#### John Chenoweth

Name of Person

## FROG AND TOAD, LLC

Firm/Company

#### 3191 NW 114th Terrace

Address

## Coral Springs, FL 33065

City/State and Zip Code

#### jpchenoweth@gmail.com

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

For further information concerning this matter, please call:

## John Chenoweth

Name of Person

954 214-4678

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

FROG AND	TOAD, LLC	
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our recor Liability Company)	<u>'ds.</u> )
The Articles of Organization for this Limited Liability Compar	ny were filed on 06/11/2013	and assigned
Florida document number L13000084170		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and end with the words "Lin"L.L.C."	mited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
Enter new mailing address, if applicable:		Carlot Vinnera
(Mailing address MAY BE A POST OFFICE BOX)		
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		200 S
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records,	enter the name of the new
registered agent and/of the new registered office address in	arc.	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eei aaaress
	, Flor	
	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 Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager , MGRM = Managing Member Address Type of Action **Title** Name | 3191 NW 114TH TERRACE RED HEN GROUP, LLC **MGRM** CORAL SPRINGS, FL 33065 Remove Remove Add<sub>3</sub> Remove Remove

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<b></b>	Jehr C	Therould
		ber or authorized representative of a member
	John henoweth	ped or printed name of signee
	* УР	Page 3 of 3

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