

11300097236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

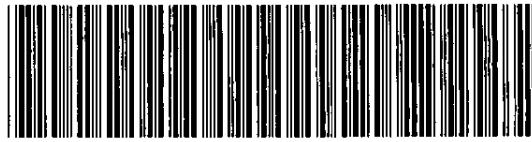
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE
12/15

DEC 16 2016
S. YOUNG

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 DEC 15 PM 4:17

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PERRETT KENNEDY 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:

JACQUELINE PERRETT
Name of Person

PERRETT KENNEDY LLC
Firm/Company

1020 EIGHTH AVENUE SOUTH, SUITE 9
Address

NAPLES, FLORIDA 34102
City/State and Zip Code

16 DEC 15 PM 4:17
STATE OF FLORIDA
REGISTRY OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

For further information concerning this matter, please call:

JACQUELINE PERRETT
Name of Person at (239) 450-4144
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

PERRETT KENNEOY 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 July 9, 2013 and assigned Florida document number L13000097236.

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)

SEARCHED
INDEXED
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SERIALIZED
16 DEC 15 PM 4:17
CLERK'S OFFICE
FLORIDA
STATE
11

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:

JACQUELINE PERRETT

New Registered Office Address:

288 BURNING TREE DRIVE

Enter Florida street address

NAPLES, Florida 34105
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.

X Jacqueline Perret

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	<u>CATHERINE KENNEDY</u>	<u>9840 VENEZIA CIRCLE</u>	<input type="checkbox"/> Add
		<u>#811</u>	<input checked="" type="checkbox"/> Remove
		<u>NAPLES, FL 34113</u>	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
		<u>16</u>	
			<input type="checkbox"/> Add
		<u>15</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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STATE TAXES
TALLAHASSEE, FLORIDA

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: DECEMBER 30, 2016 (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 DECEMBER 12, 2016.

Jacqueline Purcell
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

JACQUELINE PERRETT
Typed or printed name of signee

Typed or printed name of signee