

# L13000170701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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13 DEC 19 PM 12:36  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
DEC 23 2013

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:**

Oak Creek Homes 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:

Sarah White

Name of Person

Oak Creek Homes

Firm/Company

27218 Chula Vista Dr.

Address

Punta Gorda FL 33955

City/State and Zip Code

SouthernStyleHomeRepair@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sarah White

Name of Person

at 941 815 1080

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

Oak Creek Homes LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
13 DEC 19 PM 12:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/9/2013 and assigned  
Florida document number L13000 170701

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 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)

27218 Chula Vista Dr  
Punta Gorda FL 33955

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:

James Jones

New Registered Office Address:

27218 Chula Vista

*Enter Florida street address*

Punta Gorda, Florida FL 33955  
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR <sup>gr</sup>	James Jones	27218 Chula Vista Dr	<input checked="" type="checkbox"/> Add
MGRM	50%	Punta Gorda FL 33955	<input type="checkbox"/> Remove
MGR	Sarah White	Same as above	<input checked="" type="checkbox"/> Add
	50%		<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
note: if not possible to have 2			<input type="checkbox"/> Add
mgr, either one can be made mgrm			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

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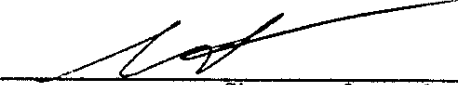
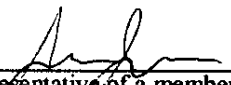
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Dated \_\_\_\_\_, \_\_\_\_\_.

	
Signature of a member or authorized representative of a member	
<u>Sarah White</u>	<u>James J. Jones</u>
Typed or printed name of signee	