

L13000176241

\_\_\_\_\_  
(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



100265905531

10/31/14--01021--003 \*\*30.00

FILED  
14 OCT 31 AM 11:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 4 2014

T. HAMPTON

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Grisez Bayshore, 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:

**William R. Grisez, Jr.**

Name of Person

**Grisez Bayshore, LLC**

Firm/Company

**P.O. Box 571072**

Address

**Tulsa, OK 74157-1072**

City/State and Zip Code

**beaugrisez@gmail.com**

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

For further information concerning this matter, please call:

**William Grisez**

at ( **918** )

**633-9635**

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Grisez Bayshore, 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 12/23/2013

Florida document number L13000176241

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)**

51 Bayshore Circle

Placida, FL 33946

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

P.O. Box 571072

Tulsa, OK 74157-1072

**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:

William R. Grisez, Jr.

New Registered Office Address:

51 Bayshore Circle

Enter Florida street address

Placida

City

Florida 33946

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.*

William R. Grisez, Jr.

If Changing Registered Agent, Signature of New Registered Agent

**FILED**  
14 OCT 31 AM 8:34  
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>
MGR	William R Grisez, Jr.	P.O. Box 571072	<input checked="" type="checkbox"/> Add
		Tulsa, OK 74157	<input type="checkbox"/> Remove
MGR	Claudia Kiernan	770 A1A Beach Blvd.	<input type="checkbox"/> Add
		Ste. A	<input checked="" type="checkbox"/> Remove
		St. Augustine, FL 32080	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED  
 OCT 31 11:31 AM  
 SECRETARY OF STATE  
 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 October 30, 2014

William R. Grisez

Signature of a member or authorized representative of a member

William R. Grisez, Jr.

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

**FILED**  
14 OCT 31 AM 11:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA