

L14000017954

(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:

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2016 MAR 23 P 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2016 MAR 14 AM 7:57
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 15, 2016

CYRIL STEARNS
23703 KEHOE MARSH COURT
LEESBURG, FL 34748

SUBJECT: WORLD CLASS TAEKWONDO OF LEESBURG, LLC
Ref. Number: L14000017954

We have received your document for WORLD CLASS TAEKWONDO OF LEESBURG, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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.

Stacey M Mason
Regulatory Specialist II

Letter Number: 316A00005360

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: World Class Taekwondo of Leesburg 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:

Cyril Stearns

Name of Person

World Class Taekwondo of Leesburg LLC

Firm/Company

23703 Kehoe Marsh Court

Address

Leesburg, FL 34748

City/State and Zip Code

wctkdleesburg@yahoo.com

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

For further information concerning this matter, please call:

Cyril Stearns

352
at ()

315- 0213

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**

World Class Taekwondo of Leesburg 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 Feb 03, 2014 and assigned
Florida document number L14000017954.

This amendment is submitted to amend the following:

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

Martial Arts of Leesburg LLC

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:

1333 South 14th Street

(Principal office address MUST BE A STREET ADDRESS)

Leesburg, FL 34748

Enter new mailing address, if applicable:

1333 South 14th Street

(Mailing address MAY BE A POST OFFICE BOX)

Leesburg, FL 34748

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:

New Registered Office Address:

1333 South 14th Street

Enter Florida street address

Leesburg

Florida 34748

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.

If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FLORIDA

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>
			<input type="checkbox"/> Add
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March 10, 2016

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.

Dated March 10 2016

Cyril Peter Stearns

Typed or printed name of signee

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CLERK OF DISTRICT COURT
JACKSONVILLE FLORIDA