

44000033034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

(Business Entity Name)

(Document Number)

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MAR 25 2016

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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2016 MAR 24 PM 12:31
LEGISLATIVE COUNCIL
TALLAHASSEE, FLORIDA

March 7, 2016

DEBORAH MCCCHESNEY
PO BOX 4789
SANTA ROSA BEACH, FL 32459

SUBJECT: WHODINI SISTERS LLC
Ref. Number: L14000033034

We have received your document for WHODINI SISTERS 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 registered agent must sign accepting the designation.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 716A00004620

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Whodini Sisters
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:

Deborah Mc Chesney
Name of Person

Whodini Sisters
Firm/Company

P.O. Box 4789
Address

Santa Rosa Beach, Florida
City/State and Zip Code

sand path 00 @ aol.com
E-mail address: (to be used for future annual report notification)
(zeros)

For further information concerning this matter, please call:

Debbie Mc Chesney at (404) 545-6354
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

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TO
ARTICLES OF ORGANIZATION
OF

(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 March 2, 2016 and assigned
Florida document number # L14060033034

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)

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX)

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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:

Mr. William Burnett

New Registered Office Address:

P.O. Box 4789, 860 Forest St.

Enter Florida street address

Santa Rosa Beach, Florida 32459

City

Zip Code

William Burnett

or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	William Burnett	860 Forest St. SRB 32459	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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E. Effective date, if other than the date of filing: _____ (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 _____, _____.

Deborah D. Mc Chesney
Signature of a member or authorized representative of a member

Deborah D. Mc Chesney
Typed or printed name of signee

DOCUMENT# L14000033034

Entity Name: WHODINI SISTERS LLC

Current Principal Place of Business:

860 FOREST ST.
SAINT ROSA BEACH, FL 32459

Current Mailing Address:

P.O. BOX 4789
SANTA ROSA BEACH, FL 32459

FEI Number: 46-2835586

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCHESNEY, GEORGE
860 FOREST ST.
SAINT ROSA BEACH, FL 32459 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: Deborah McChesney
Electronic Signature of Registered Agent

3/2/2016
Date

Authorized Person(s) Detail :

Title AMBR
Name MCCHESNEY, DEBBIE
Address P.O. BOX 4789
City-State-Zip: SANTA ROSA BEACH FL 32459

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DEBBIE MCCHESNEY

OWNER

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date