

L4000051400

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 16 2015
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
15 SEP 14 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 5, 2015

ROBERT E BEAL
808 N FRANKLIN ATREET STE 2802
TAMPA, FL 33602

SUBJECT: BOB BEAL, LLC
Ref. Number: L14000051400

We have received your document for BOB BEAL, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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: 015A00016460

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

Bob Beal LLC

SUBJECT: _____
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:

Robert E Beal

Name of Person

Bob Beal LLC

Firm/Company

808 N Franklin St Suite 2802

Address

Tampa, Florida 33602

City/State and Zip Code

bobbeal.llc@gmail.com

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Robert Beal _____ 813 546-0748
_____ at (_____) _____
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

**TO
ARTICLES OF ORGANIZATION
OF**

Bob Beal 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 March 24, 2014 and assigned
Florida document number L14000051400.

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)

808 N Franklin St Suite 2802

Tampa, Florida 33602

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

808 N Franklin St Suite 2802

Tampa, Florida 33602

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:

Enter Florida street address

_____, Florida _____
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

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
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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N/A

SECRET
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FLORIDA
TALLAHASSEE

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TALLAHASSEE, FLORIDA

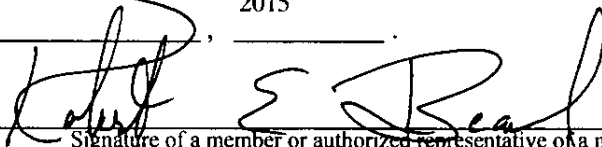
E. Effective date, if other than the date of filing: _____ (optional)

(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 September 9, 2015



Signature of a member or authorized representative of a member

Robert E Beal, Sole Member

Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

CK 3017
Paid \$35 w/ 7/24/2015
SEE ATTACHMENT →



Check Number	Date Posted	Check Amount	Account Number
3017	08/03/15	\$35.00	BUSINESS CHECKING XXXXXX3262

ROB BEAL, LLC
 808 N. Franklin St., Suite 3901
 Tampa, FL 33602-3839
 (813) 546-1038

3017
 BO-TES 991 110-1
 8/15/2015

DATE July 24, 2015

PAY TO THE ORDER OF FLORIDA DEPARTMENT OF STATE \$ 35.00

THIRTY FIVE AND 00/100 DOLLARS

BOB BEAL, LLC ADDRESS CHANGE

FOR

⑈0000003067⑈ ⑈063807563⑈ 9732033262⑈

[illegible]

FILED
15 JUL 31 PM 5:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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