

214000099319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

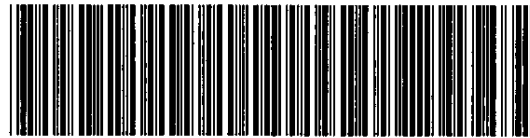
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
14 JUN 30 PM 1:43  
FALL RIVER, MASSACHUSETTS  
U.S. DEPARTMENT OF COMMERCE  
INTERNATIONAL TRADE ADMINISTRATION

Greene, James P  
19333 Summerlin Road  
Fort Myers, FL 33908  
330-402-3709

June 25, 2014

**To whom it may concern:** Florida Department of State Division of Corporations

**Reference:** Adding Authorized member and EIN

I have added proper paper work for adding Authorized person (james p greene) along with EIN from the IRS.

- A check for \$25 dollars
- Cell phone number 330 402 3709
- Return address  
19333 Summerlin Road  
Lot 763  
Ft Myers, Florida 33908

I will look for update on the site and receiving the proper paperwork.

Thank You

  
James p Greene

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: O'Grady Holdings "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:

**James p Greene**

Name of Person

**O'Grady Holdings "LLC"**

Firm/Company

**19333 Summerlin Road**

Address

**Ft Myers/Florida 33908**

City/State and Zip Code

**ogradyholdingsllc@gmail.com**

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

For further information concerning this matter, please call:

**Jame p Greene**

Name of Person

**330 402-3709**

at (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

JP6  
6/25/2014

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

O'Grady Holdings "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 june 20th, 2014 and assigned Florida document number L14000099319.

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) \_\_\_\_\_

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: \_\_\_\_\_

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**

gp6  
6/25/2014

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>
AMBR	James P Greene	19333 Summerlin Road, Lot 763 FT Myers, FL 33908	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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FILED  
JUN 30 2014  
TALLAHASSEE, FLORIDA

gpg  
6/25/2014

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

EIN Number 47-1179611

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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 6/24/2014

James P Greene

Signature of a member or authorized representative of a member

James P Greene

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

14 JUN 20 PM 1:43  
TALLAHASSEE, FLORIDA  
STATE DEPARTMENT OF REVENUE

QPG  
6/25/2014