

L14000107817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

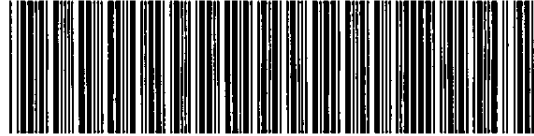
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



500287088455

06/24/16--01030--022 \*\*30.00

CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

16 JUN 20 PM 1:04

FILED

JUN 27 2016

Y SULKER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: QUIRKYVILLE**

\_\_\_\_\_  
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:

LESLIE McGUIRK

\_\_\_\_\_  
Name of Person

QUIRKYVILLE

\_\_\_\_\_  
Firm/Company

1960 West Barefoot Place

\_\_\_\_\_  
Address

Vero Beach FL 32963

\_\_\_\_\_  
City/State and Zip Code

tuckerdog@bellsouth.net

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

For further information concerning this matter, please call:

LESLIE McGUIRK

772 559-8212  
at ( )

\_\_\_\_\_  
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**

QUIRKYVILLE

(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 07/08/2014 and assigned Florida document number L14000107817.

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:**

1960 West Barefoot Place

**(Principal office address MUST BE A STREET ADDRESS)**

Vero Beach FL 32963

**Enter new mailing address, if applicable:**

1960 West Barefoot Place

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

Vero Beach FL 32963

**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:

Leslie McGuirk

New Registered Office Address:

1960 West Barefoot Place

*Enter Florida street address*

Vero Beach

Florida 32963

*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.*

*Leslie McGuirk*

**If Changing Registered Agent, Signature of New Registered Agent**

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>
CFO	George J Katilus III		<input type="checkbox"/> Add
		4635 PEBBLE BAY S Vero Beach FL 32963	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
CAO	Christine Katilus		<input type="checkbox"/> Add
		4635 PEBBLE BAY S Vero Beach FL 32963	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	George J Katilus III		<input type="checkbox"/> Add
		4635 PEBBLE BAY S Vero Beach FL 32963	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
JAN 20 PM 1:04  
ALLEN, ASSET, FLORIDA

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

Remove George & Chris Katilus & Their  
address, please, as per other sheets

FILED  
16 JUN 20 PM 1:04  
CLERK OF DISTRICT COURT  
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 6/22, 2016.

Leslie M McGuirk

Signature of a member or authorized representative of a member

LESLIE McGUIRK

Typed or printed name of signee

Page 3 of 3

Filing Fee: ~~\$25.00~~

\$ 30.00