## L14660114520

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A. BUTLER AUG 17 2022

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: BDJP Panhandle Enterprises, 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:
Debra Kolmetz Name of Person
FinicCompany
2855 Holly Rd Address
Ponce de leur, FL 32455 City/State and Zip Code
Panhandlefla Qyahoo, com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Debra Kolmetz at (850) 259-1904  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)  S60.00 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 Address:  Registration Section  Division of Corporations  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810  Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

25×0 P. L. 11 F. L.	2922 AUG 17 PM 3: 23	
(Name of the Limited Liability Companion (A Florida Limited Liability Companion)	NON'SES LLC Invasit now appears on our records. In the contract of	
(A Fronda Emiliea E	LALLANA OSEE, FL	
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)  Fonce de leon, FL 32455  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		
Florida document number <u>L14000114820</u>	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabili	lity 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)	2855 Holly Rd	
	Ponce de l'eon, FL 32	122
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<del></del>
		····
D. If amending the registered west and/an entire d. 66		
agent and/or the new registered office address here:	address on our records, enter the name of the nev	<u>v registered</u>
Name of New Registered Agent:		
New Registered Office Address:		
<del></del>	Enter Florida street address	
	, Florida	
<del></del> -	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 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>	Name	Address	Type of Action
MGR	Pauline Stokes	P.O. BOX 126	
		Blountstown, FL 32424	Remove
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			□Remove
			Change
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fective date, i	f other than the date is listed, the date must be s	e of filing:		(	optional)	
oie: It the date	inscribed in this block (	loes not meet the a	ipplicable statutory	or more than 90 days filing requirements	after filing.) Pursuant s, this date will not b	to 605.0207 e listed as
eument's effec	tive date on the Depart	ment of State's rec	cords.			
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is Iĭled.	a delayed effective date	e, but not an effect	tive time, at 12:01 i	i.m. on the earlier (	of. (b) The 90th day	aller the
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nted	8-17 Debra Ko Debra Ko	, <u>20</u>	)22.			
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	Velsta Ko Signi	ature of a member or	r authorized represent	ative of a member		_
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