

L14000124752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

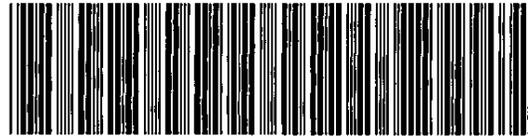
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300300834033

06/29/17--01015--012 **25.00

FILED
17 JUN 29 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 03 2017

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 16, 2017

BRAD SCHEFFLER
FOUR FEATHERS LLC
7825 5TH TERRACE
LEHIGH ACRES, FL 33936

SUBJECT: FOUR FEATHERS, LLC
Ref. Number: L14000124752

We have received your document for FOUR FEATHERS, 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.

The form submitted is for a corporation NOT an LLC.

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.

Nanette Causseaux
Regulatory Specialist II Supervisor

Letter Number: 717A00012288

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Four Feathers 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:

SEAN SCHEFFLER
Name of Person

Four Feathers LLC
Firm/Company

600 WESTON RD
Address

WENIGH ACREX FL. 33936
City/State and Zip Code

BRAD SCHEFFLER @ FourFeathers.CO
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SEAN SCHEFFLER at (239) 822-6799
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

FOUR FEATHERS 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 _____ and assigned Florida document number L14000124752.

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)

600 WESTON RD
Lehigh Acres FL 33936

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

600 WESTON RD
Lehigh Acres FL 33936

FILED
JUN 29 AM 8:49
LEHIGH ACRES, FLORIDA

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:

SEAN BRADLEY SCHEFFLER JR.

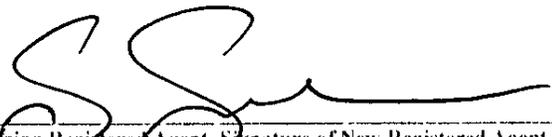
New Registered Office Address:

600 WESTON RD.
Enter Florida street address

Lehigh Acres, Florida 33936
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

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

Title Name Address Type of Action

MGR Mrs. Dorothy Scheffler 7825 5th Terr Add
Lehigh Acres Fl. 33886 Remove
 _____ _____ _____ Change

AMBR Mrs Dorothy Scheffler 7825 5th Terr, Add
Lehigh Acres Fl. 33936 Remove
 _____ _____ _____ Change

MGR SEAN BRADLEY SCHEFFLER JR 6000 WESTON RD. Add
Lehigh Acres Fl. 33936 Remove
 _____ _____ _____ Change

AMBR SEAN BRADLEY SCHEFFLER JR 6000 WESTON RD Add
Lehigh Acres Fl. 33936 Remove
 _____ _____ _____ Change

_____ _____ 392 John Jimmie Rd. Add
Immokalee Fl. 34142 Remove
 _____ _____ _____ Change

_____ _____ 6000 WESTON RD. Add
Lehigh Acres Fl. 33936 Remove
 _____ _____ _____ Change

DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA
 JUN 29 AM 8:09
 FILED

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

Multiple horizontal lines for amending information.

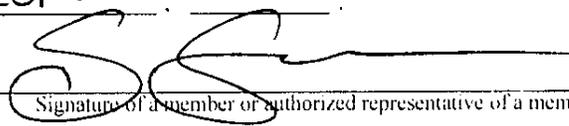
17 JUN 29 AM 8:49
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

E. Effective date, if other than the date of filing: JUNE 1, 2017 (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 6-25-2017


Signature of a member or authorized representative of a member

SEAN BRADLEY SCHEFFLER JR.
Typed or printed name of signee