

U4000/43328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

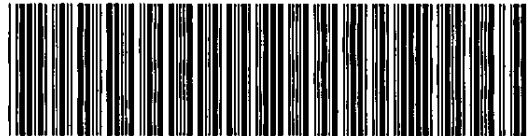
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2014 NOV 17 PM 12:00

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NOV 25 2014
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Duckworth Painting, 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:

Zachary Duckworth

Name of Person

Duckworth Painting LLC

Firm/Company

1713 Se 21st lane

Address

Cape Coral, FL 33990

City/State and Zip Code

zack 909025@yahoo.com

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

For further information concerning this matter, please call:

Zachary Duckworth

Name of Person

at (317)

Area Code

709-2017

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

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2014 NOV 17 PM 12:00
TALLAHASSEE FLORIDA

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

Duckworth Painting 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 9/12/14 and assigned Florida document number L14000143328.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Zachary Duckworth LLC
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)

1713 SE 21st lane
Cape Coral, FL 33990

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1713 SE 21st lane
Cape Coral, FL 33990

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:

Zachary Duckworth

New Registered Office Address:

1713 SE 21st lane
Enter Florida street address

Cape Coral, FL, Florida
City

2014 NOV 17 9:12:00
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CLERK OF DISTRICT COURT
FLORIDA

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 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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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 CLERK OF DISTRICT COURT
 TAMPA FLORIDA

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

Change Article 13 ~~to~~ from Painting
and Finishing to Handy man.

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 November 11, 2014.



Signature of a member or authorized representative of a member

ZACK DUCKWORTH

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2014 NOV 17 PM 12:01
CLERK OF STATE
TALLAHASSEE FLORIDA