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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CROSSROADS CONSULTING INTERNATIONAL, 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 S LAWRENCE, LCSW

Name of Person

CROSSROADS CONSULTING INTERNATIONAL, LLC

Firm/Company

11704 SE DIXIE HWY

Address

HUGE SOUND, FL 33455

City/State and Zip Code

DEB. CROSSROADS@GMAIL.COM

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

For further information concerning this matter, please call:

DEBRA LAWRENCE, LCSW

Name of Person

at (561)

Area Code

309-4764

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**

CROSSROADS CONSULTING INTERNATIONAL, 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 MARCH 13, 2015 and assigned Florida document number L14000169506.

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)

CROSSROADS CONSULTING INTERNATIONAL,
8930 SE BRIDGE ROAD
HOBE SOUND, FLA 33455

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

CROSSROADS CONSULTING INTERNATIONAL
8930 SE BRIDGE ROAD
HOBE SOUND, FLA 33455

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:

DEBRA S. LAWRENCE, LCSW

New Registered Office Address:

8930 SE BRIDGE ROAD

Enter Florida street address

HOBE SOUND

City

Florida

33455

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.

Debra S. Lawrence, LCSW

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>
MGR	BLANCHE WELLS	11704 SE DIXIE HWY	<input type="checkbox"/> Add
		HOBBS SOUND, FLA 33455	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MELINDA NEMIROFF	11704 SE DIXIE HWY	<input type="checkbox"/> Add
		HOBBS SOUND, FLA 33455	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DEBRA LAWRENCE	11704 SE DIXIE HWY	<input type="checkbox"/> Add
		HOBBS SOUND, FLA 33455	<input type="checkbox"/> Remove
		change from AMBR to MGR	<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

DEBRA LAWRENCE is changing from AMBR to MGR as
of NOVEMBER 1, 2019.

E. Effective date, if other than the date of filing: 11-1-19 (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 September 5, 2019.

Debra S. Lawrence, LCSW

Signature of a member or authorized representative of a member

DEBRA S. LAWRENCE, LCSW

Typed or printed name of signee