4/19/2017

Division of Corporations

## Florida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLALOCK, WALTERS, HELD & JOHNSON, P.A.

Account Number : 076666003611

Fax Number

: (941)748-0100 : (941)745-2093

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: <u>epennington & blalockwatters.</u> com

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APR 2 1 2017

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## **COVER LETTER**

TO: Registration Section **Division of Corporations** 

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew R. Plummer Name of Person	-
Blalock Walters P. A.	-
802 11th Street West	-
Bradenton, FL 34209  City/State and Zip Code	
E-mail address: (a) be used for future annual report notification)	COM
concerning this matter, please call:	

For further information

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

## (((H17000107147 3))) ARTICLES OF AMENDMENT $\mathbf{OT}$ ARTICLES OF ORGANIZATION OF

304 both street, a	
(Name of the Limited Liability Company (A Florida Limited Li	As it now appears on our records.)
The Articles of Organization for this Limited Liability Company we Florida document number <u>L14 600 17 1 180</u> .  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability	
The now name must be distinguishable and contain the words "Limited Liability	y 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)	20
_	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE ROX)	
B. If amending the registered agent and/or registered office address here:  Name of New Registered Agent:  New Registered Office Address:	ce address on our records, enter the name of the new
•	Enter Florida street address
·	, Florida
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and I am familiar with and ovided for in Chapter 605, F.S. Or, Bhis document is
• •	

(((H17000107147 3)))

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	Richard S. Eason	802 11th Street West	□ Add
		Boodenton, FL 34205	Remove
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an effective date is listed, the date mu ote: If the date inserted in this b ocument's effective date on the I	lock does not	meet the applicab	date of filing or more le statutory filing re	than 90 days after t quirements, this	filing.) Pursua date will not	nt to 605,0207 t be listed as
e record specifies a delaye The 90th day after the rec			an effective tim	e, at 12:01 a	.m. on the	e earlier of
ated April 19		. 2017			TAIS I	
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	Signature of a	member or authori	zed representative of	member	- 1	<del>0</del> "11
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Filing Fee: \$25.00