

L14000180143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

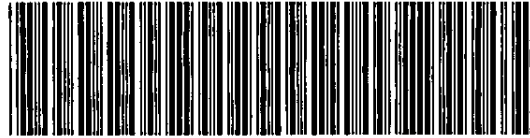
(Business Entity Name)

(Document Number)

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FILED
2015 OCT 26 PM 1:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Guillian OCT 27 2015

October 20, 2015

Registration Section
Division of Corporation
Post Office Box 6327
Tallahassee, FL 32314

Re: *Korky's Kountry Store, LLC*

Dear Sir or Madam:

Enclosed please find the following documents:

1. Articles of Amendment to Articles of Organization of Korky's Kountry Store, LLC, together with check # 1593 in the amount of **\$25.00**; and
2. Dissociation or Resignation of Member, Manager from Florida or Foreign Limited Liability Company together with check # 1594 in the amount of **\$25.00**.

If you should have any questions or need anything further, please do not hesitate to call.

Sincerely yours,



Melissa Shields
Florida Registered Paralegal

/sl/ms

Enclosures

cc: Robert Goering, Manager *via hand delivery*
Korky's Kountry Store, LLC, ~~via email only~~

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KORKY'S KOUNTRY STORE, 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:

ROBERT GOERING

Name of Person

KORKY'S KOUNTRY STORE, LLC

Firm/Company

50 GRANER DRIVE

Address

FROSTPROOF, FL 33843

City/State and Zip Code

rfgoering@gmail.com

Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT GOERING

863

632.1240

at (_____) _____

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

FILED.
2015 OCT 26 PM 1:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KORKY'S KOUNTRY STORE, 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 11/20/2014 and assigned
Florida document number L14000180143.

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)

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 agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CLAY ANTONIO DAVIS	850 OHLINGER ROAD	<input type="checkbox"/> Add
		BABSON PARK, FL 33827	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JULIE MARIE GOERING	50 GRANER DRIVE	<input checked="" type="checkbox"/> Add
		FROSTPROOF, FL 33843	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

1. The first part of the document discusses the importance of maintaining accurate records of all transactions.

2. It also highlights the need for regular audits to ensure compliance with financial regulations.

3. Furthermore, it emphasizes the role of transparency in building trust among stakeholders.

4. In addition, the document outlines various strategies for improving operational efficiency.

5. Finally, it concludes by stressing the significance of continuous learning and adaptation in today's fast-paced business environment.

E. Effective date, if other than the date of filing: OCTOBER 14, 2015 (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 October 14, 2015

Robert L. Soering
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

ROBERT GOERING, MEMBER AND MANAGER

Typed or printed name of signee

FILED
2015 OCT 26 PM 1:56
CLERK OF DISTRICT COURT
SECOND JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA
116-69522-3