## 14000195795

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
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(Document Number)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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Office Use Only



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## **COVER LETTER**

TO:

TO: Registration S Division of Co		e e e e e e e e e e e e e e e e e e e			
Denise M.	Bash-May, LLC	•			
SUBJECT: Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Jeffery L. May				
		Name of Person			
	Denise M. Bash-May, LL	c			
		Firm/Company			
	135 Winston Ct.				
		Address			
	St. Johns, FL 32259				
	jlmayrealtor@gmail.com	City/State and Zip Code	2000 J		
		to be used for future annual report notification)	<b>^</b> :		
For further information of	concerning this matter, please c	all:	55 -2		
Jeffery L. May	<u> </u>	904 814-3307 at ( )	·····		
Name o	of Person	Area Code Daytime Telephone Number			
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified C	of Status &		
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations			
P.O. Box 632 Tallahassee,		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	)		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Denise M. Bash-May, LLC		
(Name of the Limi	ted Liability Company as it now as (A Florida Limited Liability Compa	ppears on our records.) any)
The Articles of Organization for this Limited I	Liability Company were filed or	n 12/29/2014 and assigned
lorida document number L14000195795		
his amendment is submitted to amend the fol	lowing:	
. If amending name, enter the new name o	of the limited liability compan	y here:
he new name must be distinguishable and contain the	words "Limited Liability Company."	the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	
Principal office address MUST BE A STREI	ET ADDRESS)	
		~3
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	
		* (-) 
If amending the registered agent and/or gent and/or the new registered office address		ur records, enter the name of the new registe
_		
Name of New Registered Agent:	Jeffery L. May	
New Registered Office Address:	135 Winston Ct.	
	Enter	- Florida street address
	St. Johns,	, Florida 32259
	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

<u>Title</u>	Name	Address	Type of Action
MGMR	Denise M. Bash-May	135 Winston Ct.	
		St. Johns, FL 32259	■Remove
		<del></del>	□Change
MGMR	Jeffery L. May	135 Winston Ct.	—————————————————————————————————————
		St. Johns, FL 32259	□Remove
			Change
<del></del>			
			□Remove
			□ Change
			□Add
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			□Remove
			□ Change

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Effective date, if other than the date of filing:	(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
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	atory filing requirements, this date will not be listed as
·	
e record specifies a delayed effective date, but not an effective time, at 17 rd is filed.	2:01 a.m. on the earlier of: (b) The 90th day after the
Dated $G-20$ , $2023$ .	
Mul M. Bayl - My Manual rep	Jeff. 7-2
	resentative of a method //
Denise M. Bash-May AND	Jeffery L. May

Typed or printed name of signee