

L14000196311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

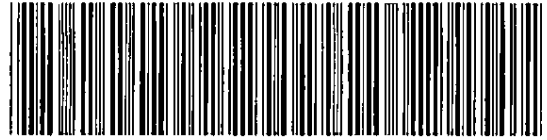
(Business Entity Name)

(Document Number)

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11/7/23

SECRETARY OF STATE
TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 12, 2023

MICHELE KYPFER
4408 POVERTY CREEK ROAD
CRESTVIEW, FL 32539

SUBJECT: CHARLES REYNOLDS "THE LAWN BARBER" LLC
Ref. Number: L14000196311

We have received your document for CHARLES REYNOLDS "THE LAWN BARBER" LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN
Regulatory Specialist II

Letter Number: 823A00023660

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TALLAHASSEE, FL

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

Charles Reynolds "The Lawn Barber 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 12/30/2014 and assigned
Florida document number L14000196311

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)

2618 Lake Silver Road

Crestview, FL 32539

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2618 Lake Silver Road

Crestview, FL 32539

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:

Michele Kypfer

New Registered Office Address:

4408 Poverty Creek Road

Enter Florida street address

Crestview

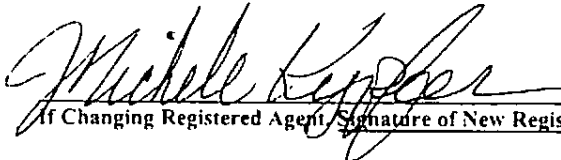
, Florida 32539

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.


Signature of New Registered Agent

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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>
CEO	Charles Reynolds	2618 Lake Silver Road	<input type="checkbox"/> Add
		Crestview, FL 32539	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
CFO	Jerney Payne	5532 Royal St	<input checked="" type="checkbox"/> Add
		Crestview, FL 32539	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Sec	REYNOLDS, TAYQUOYAH	2618 Lake Silver Road	<input type="checkbox"/> Add
		Crestview, FL 32539	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
Ambr	Tanisha Payne	5532 Royal Street	<input checked="" type="checkbox"/> Add
		Crestview, FL 32539	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Changing addresses and register agent information

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TALLAHASSEE, FL

מחנה

E. Effective date, if other than the date of filing: October 1, 2023 (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 21 2023

Signature of a member or authorized representative of a member

Charles Reynolds

Typed or printed name of signee

Filing Fee: \$25.00