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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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1:28 PM  
FBI

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Michael Campbell Post 370 The American Legion 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:

Lance Sloan

Name of Person

Michael Campbell Post 370 The American Legion LLC

Firm/Company

1958 Dr. Martin Luther King Jr Way

Address

Sarasota, Florida 34234

City/State and Zip Code

michaelcampbellpost.370@gmail.com

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

For further information concerning this matter, please call:

Lance Sloan

941 8791111  
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

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TALLAHASSEE FLORIDA

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

Michael Campbell Post 370 The American Legion 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 01/28/2015 and assigned  
Florida document number L15000016478.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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)

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TALLAHASSEE FLORIDA

**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:

~~XXXXXXXXXX~~ HARDRICK RIDDLE JR

New Registered Office Address:

1958 Dr. Martin Luther King Jr. Way

Enter Florida street address

Sarasota

City

Florida 34234

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.*

*Harold Riddle Jr*  
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	Lance Sloan	1958 Dr. Martin Luther King Jr. Way	<input checked="" type="checkbox"/> Add
		Hardick Riddle	<input checked="" type="checkbox"/> Remove
		Sarasota, Florida 34234	
AMBR	Hardrick Riddle	1958 Dr. Martin Luther King Jr. Way	<input checked="" type="checkbox"/> Add
		Lance Sloan	<input checked="" type="checkbox"/> Remove
		Sarasota, Florida 34234	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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CLERK OF DISTRICT COURT  
HALL COUNTY FLORIDA

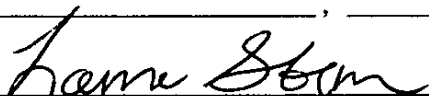
FILED

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

In the filing of the detail by entity name, the Registered Agent Name and  
address should have been Hardrick Riddle. The Authorized Personal(s) detail  
Name and Address Title MGR should have been Lance Sloan and everything  
else should remain the same.

E. Effective date, if other than the date of filing: 01/24/2015 (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after  
the date this document is filed by the Florida Department of State)

Dated 02/17/2015



Signature of a member or authorized representative of a member

Lance Sloan

Typed or printed name of signee

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