

L150000 18694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200278509302

10/30/15--01006--014 ** 25.00

FILED
15 OCT 30 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV - 2 2015
J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shawn Elliott of South Florida, 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:

H. Bradley Ress

Name of Person

Shawn Elliott of South Florida, LLC

Firm/Company

5060 Bottlebrush Street

Address

Delray Beach, FL 33484

City/State and Zip Code

hress@me.com

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

For further information concerning this matter, please call:

H. Bradley Ress

561 573-6539
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**

Shawn Elliott Of South Florida, 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 01/30/2015 and assigned
Florida document number L15000018694.

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
_____, Florida
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

15 OCT 30 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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	Ross, David	6860 Lions Head Lane	<input type="checkbox"/> Add
		Boca Raton, FL 33496	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gutierrez, Manuel	959 Greensward Lane	<input type="checkbox"/> Add
		Delray Beach, FL 33445	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	H. Bradley Ress	5060 Bottlebrush Street	<input checked="" type="checkbox"/> Add
		Delray Beach, FL 33484	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Zach Elliott	282 Anchorage Dr.	<input checked="" type="checkbox"/> Add
		Woodbury, NY 11797	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

15 OCT 30 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 OCT 30 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Dated October 21, 2015

H. Bradley Ress

Filing Fee: \$25.00