

L15000018741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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*Lawrence*

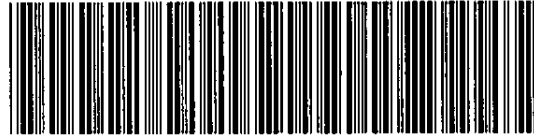
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS

O SIMMONS

SEP 01 2017

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Surterra 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:

Dan Russell, Esq.

Name of Person

Jones Walker LLP

Firm/Company

215 S. Monroe Street, Suite 130

Address

Tallahassee, FL 32301

City/State and Zip Code

drussell@joneswalker.com

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

For further information concerning this matter, please call:

Dan Russell

850

425-7813

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

Surterra Florida, LLC

(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**(Principal office address MUST BE A STREET ADDRESS)**

***(Mailing address MAY BE A POST OFFICE BOX)***

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

**, Florida**

City

---

*Zip Code*

**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	Van Dyk, Wes	1639 Village Square Blvd.	<input type="checkbox"/> Add
		Tallahassee, FL 32309	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Havenick, Alexander	1639 Village Square Blvd.	<input type="checkbox"/> Add
		Tallahassee, FL 32309	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Becker, Jason	1639 Village Square Blvd.	<input type="checkbox"/> Add
		Tallahassee, FL 32309	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Demott, Jeffrey	1639 Village Square Blvd.	<input type="checkbox"/> Add
		Tallahassee, FL 32309	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Havenick, Michael	1639 Village Square Blvd.	<input type="checkbox"/> Add
		Tallahassee, FL 32309	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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DIVISION OF COURT DEPT. LUMS

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**E. 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 (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 August 31, 2017

  
Signature of a member

Daniel R. Russell, Esq. Attorney  
Typed or printed name of signer

Typed or printed name of signee