

LISU000051675

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

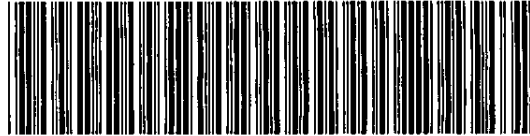
(Business Entity Name)

(Document Number)

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07/27/15--01041--009 \*\*43.75

FILED  
2015 DEC -4 AM 11:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

M. O'Quinn DEC -4 2015

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Way Cool Kitchen and Bath 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:

Kerry Fergusson  
Name of Person

Phil Kean Kitchens and Bath  
Firm/Company

412 W. Fairbanks Ave  
Address

Winter Park FL 32789  
City/State and Zip Code

Kerry@philkeandesigns.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kerry Fergusson  
Name of Person

at 407  
Area Code

599-3422  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

15 DEC -4 AM 11:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 30, 2015

KERRY FERGUSON  
PHIL KEAN KITCHENS, LLC  
912 W FAIRBANKS AVE  
WINTER PARK, FL 3279

SUBJECT: WAYCOOL KITCHEN AND BATH LLC  
Ref. Number: L15000051675

We have received your document for WAYCOOL KITCHEN AND BATH LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 415A00016035

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2015 DEC -4 AM 11:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

WayCool Kitchens and Bath 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 3/20/15 and assigned  
Florida document number L15000051675.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Phil Kean Kitchens and Bath LLC

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)

912 W. Fairbanks Ave  
Winter Park, FL 32789

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

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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TALLAHASSEE, FLORIDA

**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.

(b) The 90th day after the record is filed.

Dated

August 24<sup>th</sup> 2015

Signature of a member or authorized representative of a member

Phil Kean

Typed or printed name of signee