

W15000062423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

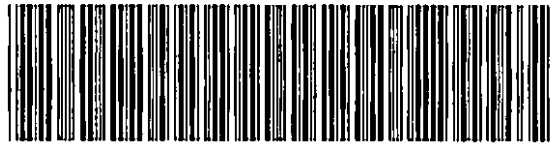
(Business Entity Name)

(Document Number)

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02/18/22--01018--014 \*\*61.25

22 APR 11 10:20:05

T. MATTHEWS

APR -4 2022



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2022 MAR 17 PM 1:17

SECRETARY OF STATE  
TALLAHASSEE, FL

February 28, 2022

BILLY R. ELIXSON  
14771 SW 58TH DRIVE  
LAKE BUTLER, FL 32054

SUBJECT: TOMAHAWK LAND LLC  
Ref. Number: L15000062423

We have received your document for TOMAHAWK LAND LLC and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LIMITED PARTNERSHIP, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6050.

Tekayla T Matthews  
OPS

Letter Number: 422A00004824

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Tomahawk Land, 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:

Billy R. Elixson  
Name of Person

Tomahawk Land, LLC.  
Firm/Company

14771 SW 58<sup>th</sup> Drive  
Address

Lake Butler, FL 32054  
City/State and Zip Code

m.rivers@cdmcontracting.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Billy R. Elixson at (386) 496-3883  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |                                             |                                                                                   |                                                                                                  |                                                                                                                            |
|---------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Tomahawk Land, LLC.

22 JAN 17 PM 2:05

(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 Jan. 27, 2022 and assigned Florida document number L15000062423.

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)

Billy R. Elixson

14771 SW 58<sup>th</sup> Drive

Lake Butler Fl. 32054

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Billy R. Elixson

14771 SW 58<sup>th</sup> Drive

Lake Butler Fl. 32054

**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:

Billy R. Elixson

New Registered Office Address:

14771 SW 58<sup>th</sup> Drive

*Enter Florida street address*

Lake Butler

*City*

Florida 32054

*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.*

Billy R. Elixson

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>
AMBR	Ralph Noms	319 SW Ralph Terr.	<input type="checkbox"/> Add
		lake City, Fl. 32024	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Frederick Noms	359 SW Ralph Terr.	<input type="checkbox"/> Add
		lake City, Fl. 32024	<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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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

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.

Billy R. E.  
Signature of a member or authorized representative of a member

Billy R. Elixson  
Typed or printed name of signee