

L15000069302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

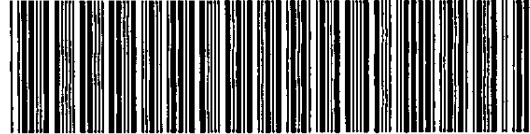
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
SEP 28 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 10, 2015

JESSICA POSEY, CPA, P.A.
JESSICA POSEY, CPA
3050 SHELL RD.
JAY, FL 32565

SUBJECT: SANFORD SUTTON MASONRY "LLC."
Ref. Number: L15000069302

We have received your document for SANFORD SUTTON MASONRY "LLC." and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Chapter 605, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 715A00019106

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15 SEP 24 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Jessica Posey, CPA, P.A.

3050 Shell Rd
Jay, FL 32565
E-mail: Jessica.Posey@yahoo.com

Ph: (850) 675-6512
Cell: (850) 336-2211

Florida Department of State
Division of Corporations

Re: Sanford Sutton Masonry "LLC"
Ref. Num: L15000069302

Letter Number: 715A00019106

September 18, 2015

The corrections have been made regarding the amendment to articles of organization, along with the letter number 715A00019106.

If anything further is needed, please don't hesitate to contact me at (850) 675-6512.

Thank you in advance to your attention to this matter.

Sincerely,



Jessica Posey
President

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SANFORD SUTTON MASONRY "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:

JESSICA POSEY, CPA

Name of Person

JESSICA POSEY, CPA, P.A.

Firm/Company

3050 SHELL RD

Address

JAY, FL 32565

City/State and Zip Code

JESSICA.POSEY@YAHOO.COM

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

For further information concerning this matter, please call:

SANFORD SUTTON

850

686-9655

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**

SANFORD SUTTON MASONRY "LLC"

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/07/2015 and assigned
Florida document number L15000069302.

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

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	FRANK R. JONES	6500 BROCK AVENUE, FL	<input checked="" type="checkbox"/> Add
		MILTON, FL 32570	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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

FRANK R. JONES OBTAIN 10% OWNERSHIP

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 09/03/2015 (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 SEPTEMBER 3RD, 2015



Signature of a member or authorized representative of a member

SANFORD T. SUTTON

Typed or printed name of signee