

LF000077831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

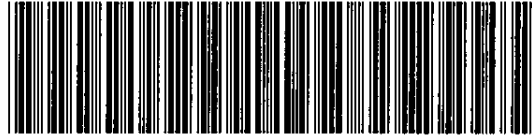
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 20 2015
S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SPACE COAST CUSTOM INTERIORS 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:

STACY L RIGDON
Name of Person
SPACE COAST CUSTOM INTERIORS LLC
Firm/Company
141 N BANANA RIVER DR
Address
MERRITT ISLAND, FL 32952
City/State and Zip Code
SPACECOASTCUSTOMINTERIORS@GMAIL.COM
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

STACY L RIGDON at (321) 501-4048
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**

SPACE COAST CUSTOM INTERIORS, 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 5/4/2015 and assigned Florida document number L15000077831.

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)

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TALLAHASSEE, FLORIDA

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>
AMBR	STACY L RIGDON	141 W Banana Rv Dr.	<input checked="" type="checkbox"/> Add
		Merrett Island, HI 32952	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BOBBY MARTIN	141 W Banana River Dr.	<input checked="" type="checkbox"/> Add
		Merrett Island, HI 32952	<input 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"/> Remove
			<input type="checkbox"/> Change

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

Multiple horizontal lines for amending information.

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 October 12, 2015.

Stacy L. Rigdon

Signature of a member or authorized representative of a member

STACY L RIGDON

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



Detail by Registered Agent Name

Florida Limited Liability Company

SPACE COAST CUSTOM INTERIORS LLC

Filing Information

Document Number	L15000077831
FE/EIN Number	NONE
Date Filed	05/04/2015
Effective Date	05/01/2015
State	FL
Status	ACTIVE

Principal Address

141 N BANANA RIVER DR
MERRITT ISLAND, FL 32952

Mailing Address

141 N BANANA RIVER DR
MERRITT ISLAND, FL 32952

Registered Agent Name & Address

RIGDON, STACY L
141 N BANANA RIVER DR
MERRITT ISLAND, FL 32952

Authorized Person(s) Detail

Name & Address

Title MGR

RIGDON, STACY L
141 N BANANA RIVER DR
MERRITT ISLAND, FL 32952

Annual Reports

No Annual Reports Filed

Document Images

*Contact for Sunbiz:
850-245-6051*

Auth

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TALLAHASSEE, FLORIDA

10/9/2015

Detail by Registered Agent Name

05/04/2015 -- Florida Limited Liability

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15 OCT 19 PM 5:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L15000077831
FILED 8:00 AM
May 04, 2015
Sec. Of State
jdharris

Article I

The name of the Limited Liability Company is:
SPACE COAST CUSTOM INTERIORS LLC

Article II

The street address of the principal office of the Limited Liability Company is:
141 N BANANA RIVER DR
MERRITT ISLAND, FL. 32952

The mailing address of the Limited Liability Company is:
141 N BANANA RIVER DR
MERRITT ISLAND, FL. 32952

Article III

The name and Florida street address of the registered agent is:
STACY L RIGDON
141 N BANANA RIVER DR
MERRITT ISLAND, FL. 32952

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: STACY L RIGDON

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TALLAHASSEE, FLORIDA

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR
STACY L RIGDON
141 N BANANA RIVER DR
MERRITT ISLAND, FL. 32952

L15000077831
FILED 8:00 AM
May 04, 2015
Sec. Of State
jdharris

Article V

The effective date for this Limited Liability Company shall be:

05/01/2015

Signature of member or an authorized representative

Electronic Signature: STACY L RIGDON

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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