

L15000086111

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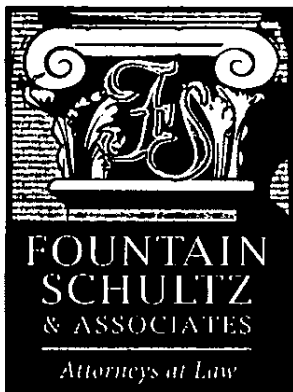
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2016 OCT 13 A 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

OCT 13 2016



KENNETH R. FOUNTAIN
KERRY ANNE SCHULTZ
SCOTT C. BRIDGFORD

2045 FOUNTAIN PROFESSIONAL CT.
SUITE A
NAVARRE, FLORIDA 32566
TEL: (850) 939-3535
FAX: (850) 939-3539

SANTA ROSA BEACH
TEL: (850) 622-2700
FAX: (850) 622-2722

October 11, 2016

VIA REGULAR U.S. MAIL

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

Re: Amendment for AJ Hospitality FWB, LLC

Dear Sir or Madam:

Enclosed please find the original Articles of Amendment to The Articles of Organization of AJ Hospitality FWB, LLC. Also enclosed is our check in the amount of \$25.00 for filing.

Thank you for your assistance in this and should you have questions, please let us know.

Sincerely,
Fountain, Schultz & Associates, P.L.

Kerry Anne Schultz, Esquire

KAS: mtl
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AJ HOSPITALITY FWB, 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 ANNE SCHULTZ

Name of Person

FOUNTAIN, SCHULTZ & ASSOCIATES, PL

Firm/Company

2045 FOUNTAIN PROFESSIONAL CT., SUITE A

Address

NAVARRE, FL 32566

City/State and Zip Code

KASchultz@fountainlaw.com

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

For further information concerning this matter, please call:

KERRY ANNE SCHULTZ

850
at ()

939-3535

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**

AJ HOSPITALITY FWB, 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 05/14/2015 and assigned
Florida document number L15000086111.

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 "LLC."

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: KERRY ANNE SCHULTZ, ESQUIRE

New Registered Office Address: 2045 FOUNTIAN PROFESSIONAL CT., SUITE A
Enter Florida street address

NAVARRE, Florida 32566
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	POWELL, DAVID L	1241 AIRPORT RD	<input type="checkbox"/> Add
		STE H	<input checked="" type="checkbox"/> Remove
		DESTIN, FL 32541	<input type="checkbox"/> Change
PRES	PATEL, PRASHANT H	472 HUGH ADAMS RD	<input type="checkbox"/> Add
		DEFUNIAK SPRINGS, FL	<input checked="" type="checkbox"/> Remove
		32435	<input type="checkbox"/> Change
MGR	PATEL, PRASHANT H	100 MIRACLE STRIP PKWY	<input checked="" type="checkbox"/> Add
		FORT WALTON BEACH, FL	<input type="checkbox"/> Remove
		32548	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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[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.

Dated OCT 11th, 2016

[Signature]

Signature of a member or authorized representative of a member

10-11-16

PRASHANT PATEL
Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA