

LIS 000 128452

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GARY, DYTRYCH & RYAN, P.A.

Account Number : I19990000255

Phone : (561) 844-3700

Fax Number : (561) 844-2388

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: BSLAWSON@SLAWSONLAW.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

SLAWSON ENTERPRISES, LLC

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OCT 15 2015

J SHIVERS

Oct. 14. 2015 10:52AM

Gary Dytrych & Ryan

No. 9355 P. 2

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Slawson Enterprises, 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:

Richard W. Slawson

Name of Person

Firm/Company

737 Cote Azur Dr.

Address

Palm Beach Gardnes, FL 33410

City/State and Zip Code

rslawson@slawsonlaw.com

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

For further information concerning this matter, please call:

Richard W. Slawson

561 346-5222
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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

((H15000245948 3)))

Slawson Enterprises, 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 July 28, 2015 and assigned
Florida document number L15000128452.

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: Richard W. Slawson

New Registered Office Address: 737 Cote Azur Dr.

Enter Florida street address

Palm Beach Gardens

City

Florida

33461

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

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AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AR	Scott R. Slawson	737 Cote Azur Dr.	<input type="checkbox"/> Add
		Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	Richard W. Slawson	737 Cote Azur Dr.	<input type="checkbox"/> Add
		Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Richard W. Slawson	737 Cote Azur Dr.	<input checked="" type="checkbox"/> Add
		Palm Beach Gardens, FL 33410	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

Oct. 14. 2015 10:52AM Gary Dytrych & Ryan

No. 9355 P. 5

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

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15 OCT 14 AM 7:57
SECRETARY OF STATE
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.

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 14 2015

Richard W. Slawson
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Richard W. Slawson

Typed or printed name of signer