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COVER LETTER

TO:	Registration Se Division of Cor				
011010		ADS & WILDFLOWERS, LL	С		
SUBJE	∪I; <u></u> _	Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub	-		
		ATHELINE S FIGUEROA	A DIAZ		
			Name of Person		
		CROSSROADS & WILD	FLOWERS, LLC		
			Firm/Company	<u> </u>	
		1314 PRIORY CIR			
		Address			
		WINTER GARDEN, FL 34787			
		SUZETTE@JUSTAHAMM	City/State and Zip Code MER.COM		
		E-mail address: (to be used for future annual report notifi	cation)	
For furth	ner information c	oncerning this matter, please ca	all:		
ATHEL	INE'S FIGUERO	DA DIAZ	407 408-1234		
	Name o	f Person		Telephone Number	
Enclosed	d is a check for th	ne 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)	
		ING ABBRESS	CTD CCT/OOUBLE	CD ADDRESS.	

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

CROSSROADS & WILDFLOWERS, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on AUGUST 11, 2015	_ and assigned
Florida document number L15000136803		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
N/A		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:	1314 PRIORY CIR	
(Principal office address MUST BE A STREET ADDRESS)	WINTER GARDEN, FL 34787	
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	1314 PRIORY CIR	T 2
(Mailing address MAY BE A POST OF FICE BOX)	WINTER GARDEN, FL 34787	
		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address: 1314	eline S. Figueroa Diaz Priony Cir Enter Vorida street address	
<u> </u>	Charden P. Florida 31	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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	ERIN D. BREEDEN	18691 NE 60TH ST WILLISTON, FL 32696	
			Remove
			Change
			Add
			□ Remove
			□ Change
			Add
			Remove
		 	Change
			□ Add
			☐ Remove
			Change
			□ Add
			□ Remove
			□ Change
			□ Add
			Remove
			☐ Change

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f an effect Note: If	e date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 0th day after the record is filed.
Dated	duly 26th, 2019.
	Signature of a number or authorized representative of a member
	Signature of a pember or authorized representative of a member

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Filing Fee: \$25.00