

L15000155552

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

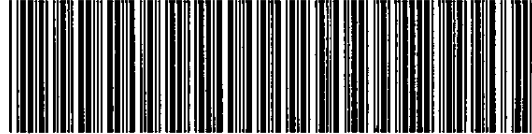
(Business Entity Name)

(Document Number)

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15 OCT -5 AM 7:04
CLERK OF SUPERIOR COURT
STATE OF FLORIDA

OCT 06 2015
J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gator Covers, 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:

Patricia A Givens

Name of Person

Gator Covers, LLC

Firm/Company

2201 N Tamiami Trail

Address

N Fort Myers, FL 33903

City/State and Zip Code

patricia@gatorcoversllc.com

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

For further information concerning this matter, please call:

Patricia A Givens

239

822-5550

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

Gator Covers, LLC

The Articles of Organization for this Limited Liability Company were filed on September 11, 2015 and assigned Florida document number L15000155552

A. If amending name, enter the new name of the limited liability company here:

Enter new principal offices address, if applicable:

16130 Bentwood Palms Drive

(Principal office address MUST BE A STREET ADDRESS)

Fort Myers, FL 33908

Enter new mailing address, if applicable:

2201 N Tamiami Trail

(Mailing address MAY BE A POST OFFICE BOX)

N Fort Myers, FL 33903

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:

Dale T Givens

New Registered Office Address:

2201 N Tamiami Trail

Enter Florida street address

N Fort Myers

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>
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
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_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change

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

Address and Registered Agent changes only.

15 OCT -5 AM 7:06

E. Effective date, if other than the date of filing: September 10, 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 October 1 2015

Signature of a member or authorized representative of a member

Patricia A Givens

Typed or printed name of signee