

L15000162382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

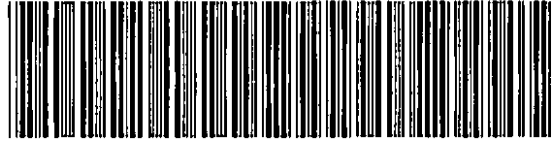
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/22/21--01023--011 **35.00

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 4, 2021

JENNIFER MCDADE
322 HERMITAGE DR.
ALTAMONTE SPRINGS DR., FL 32701

SUBJECT: MCDADE DESIGN LLC
Ref. Number: L15000162382

We have received your document for MCDADE DESIGN LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers
Regulatory Specialist II

Letter Number: 921A00009211

2021 MAY 28 PM 12:03

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: McDade Design
Name of Corporation

DOCUMENT NUMBER: 47-5134904

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennifer Flynn McDade MBR
Name of Contact Person

McDade Design
Firm/Company

322 Hermitage Drive
Address

Altamonte Springs FL 32701-6206
City/State and Zip Code

momina.mcdade@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer McDade at (407) 756-9483
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: McDade Design
2. The principal office address: 322 Hermitage Drive
Altamonte Springs FL 32701-6206
3. The mailing address (if different): same
4. Date of incorporation/qualification: April 11, 2018 Document number: 47-5134904
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Jon C. McDade
322 Hermitage Drive
Altamonte Springs FL 32701-6206

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

Jennifer F. McDade
322 Hermitage Drive
Altamonte Springs FL 32701-6206

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

Jennifer F. McDade
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

Jennifer F. McDade
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: McDade Design 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:

Jennifer Flynn McDade MBR
Name of Person

McDade Design LLC
Firm/Company

322 Hermitage Drive
Address

Altamonte Springs FL 32701-6206
City/State and Zip Code

mommamcdade@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer McDade at (407) 756-9483
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

McDade Design

(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 4-11-18 and assigned
Florida document number 47-5134904

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:

Jennifer McDade

New Registered Office Address:

322 Hermitage Drive

Enter Florida street address

Altamonte Springs

City

Florida

32701-6206

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.

Jennifer McDade
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>
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MGR	Jennifer McRade	322 Hermitage Dr.	<input type="checkbox"/> Add
		Altamonte Springs FL 32701	<input type="checkbox"/> Remove

☒ Change

AMBR	Jennifer McRade	322 Hermitage Dr.	<input type="checkbox"/> Add
		Altamonte Springs FL	<input type="checkbox"/> Remove

32701 ☒ Change

registered
Agent

	Jon C. McRade	322 Hermitage Dr.	<input type="checkbox"/> Add
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Altamonte Springs FL ☒ Remove

32701 ☐ Change

			<input type="checkbox"/> Add
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☐ Remove

☐ Change

			<input type="checkbox"/> Add
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☐ Remove

☐ Change

			<input type="checkbox"/> Add
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☐ Remove

☐ Change

[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.

Signature of a member of a

Jennifer E.

Jennifer F. McDade

Filing Fee: \$25.00