4500171132

(Re	equestor's Name)	<u></u>
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	f)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
		:
,	<u> </u>	

Office Use Only



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SECRETARY OF STATE

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Division of Corporations

October 19, 2015

CATTELLA L GREENLEE-MOORE 4234 WINDERPARK CT JACKSONVILLE, FL 32257

SUBJECT: THE ROD'S SHACK LLC

Ref. Number: L15000171132

We have received your document for THE ROD'S SHACK LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed 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) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 015A00022026

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www.sunbiz.org

COVER LETTER

TO: Registration Se Division of Cor					
	S' SHACK LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	CATTELLA GREENLEE	-MOORE			
		Name of Person			
		<u> </u>			
		Firm/Company			
	4234 WINDERPARK CT		•		
		Address			
	JACKSONVILLE FL 322	57		2015 SEC	
		City/State and Zip Code		AH. AET) ا مبترین
	ONAANDNAJA@HOTM			SSA -	m
•	E-mail address: (to be used for future annual report notifi	cation)	(71 am	LU
For further information of	oncerning this matter, please c	all:		FES.	
CATTELLA GREENLE	EE-MOORE	904 233-9600		2: 48 STATE ORNO	
Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	he following ainount:				•
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

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

THE ROD'S SHACK LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number L15000171132	any were filed on 10/07/2015	and assigned
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 L	isbility Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADDRESS		7. 22 2. 22
•		
Enter new mailing address, if applicable:		SSE D
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
		# 8
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		er the name of the new
Name of New Registered Agent:		<u>.</u>
New Registered Office Address:		
	Enter Florida street address	
	, 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>	Address	Type of Action
MGR	Cattella Greeniee- Moore	4234 WINDERPARK CT	= Add
		JACKSONVILLE FL 32257	□ Remove
			☐ Change
MGR	RODNBY MOORE	4234 WINDERPARK CT	Add
		JACKSONVILLE FL 32257	Remove
			Change
			□ Add
,			SE SRETARY C
			P D AM
			□ Change
			□ Add
			□ Remove
			Change
			□ Remove
			Change

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				西南	ထ
Sective date, if other than th an effective date is listed, the date m	e date of filing:		line an many than DO	(optional)	Discussions on 608 020
an effective date is listed, the date in ote: If the date inserted in this locument's effective date on the	plock does not meet the	applicable statut	ory filing requiren	ents, this date	will not be listed a
e record specifies a delaye The 90th day after the re	ed effective date, b cord is filed.	out not an effe	ctive time, at	12:01 a.m. (on the earlier o
ated OCTOBER 19	2015	; 			
	-10		11	. 0	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00