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## COVER I ETTER

COVER LETTER	
TO: Registration Section Division of Corporations	
SUBJECT: Penny Carson 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:	
Penny Carson Name of Person	_
Penny Carron LLC Firm/Company	_
760 Chicago Ave	SECRETALLY
Address	言語言
S. Daytona FL 3249 City/State and Zip Eode	ART CELL
Paranon 928@ hotmail. (on E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Penny Carson at (386) 366-1672  Name of Person Area Code Daytime Telephone Number	<del>-</del>
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified	ite 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

Penny Car	son LLC	
(Name of the Limited L (A F	iability Company as it now appears on lorida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabil Florida document number	ity Company were filed on $\frac{1/2}{524}$ .	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words  Enter new principal offices address, if applicable  (Principal office address MUST BE A STREET A	:	ation "LLC" or the abbreviation "L.L.C."
(Principal Office address MUST BE A STREET AL	DDKESS)	
Enter new mailing address, if applicable:		SECRE F
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	p . pl . t	
	Enter Florida st	
	City	, Florida 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> **Name** <u>Address</u> **Type of Action** Bruce Carson Jr 760 Chicago Ane Xadd

South Daytona, FL32119 | Remove ☐ Change □ Add ☐ Remove ☐ Change 🖆 Change 🗢 □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

D. If amending any other inform	actory enter enange(s) is	ore (mach adamona)	onecia, y necessui	<i>99</i>
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. Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	ust be specific and cannot be prolock does not meet the app	licable statutory filing req	(optional nan 90 days after filing uirements, this date	g.) Pursuant to 605.0207 (3
the record specifies a delayed) The 90th day after the re		not an effective time	, at 12:01 a.m.	on the earlier of:
Dated 5/12	, ZOIC	thorized representative of a	member	
Penn	J	inted name of signee		

Page 3 of 3

Filing Fee: \$25.00