

L16000023096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

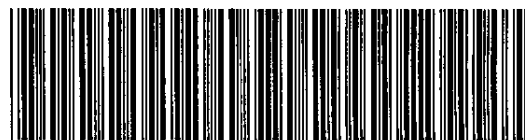
(Business Entity Name)

(Document Number)

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17 JAN 11 PM 4:39
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TALLAHASSEE, FLORIDA

D. SCOTT

JAN 12 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 13, 2016

JONAH PERKINS
2411 UNION STREET S
ST. PETERSBURG, FL 33712

SUBJECT: CANNIDA CO, LLC
Ref. Number: L16000023096

RECEIVED
2017 JAN 11 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CANNIDA CO, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a GP, but your entity is a FL LLC. 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) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 916A00026437

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cannida Co 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:

Jonah Perkins
Name of Person

Cannida Co LLC
Firm/Company

2411 Union Street South
Address

St. Petersburg FL 33712
City/State and Zip Code

Perkins, Jonah @ gmail . com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jonah Perkins at (727) 642 3709
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

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TALLAHASSEE, FL
SECRETARY OF STATE

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

Cannida Co. LLC

(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 02/02/2016 and assigned
Florida document number EIN: 811539176 DONORS 080250428 SK 15220000

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)

2411 Union Street South
St. Petersburg FL 33712

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9300 Lottisford Rd Apt 5301
Large MD 20774

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:

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>	<u>Address</u>	<u>Type of Action</u>
Mrs.	Delya Edwards	2400 15th Ave S # 51	<input type="checkbox"/> Add
		St. Petersburg FL 33712	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mr	David Pierce	2411 Union Street S	<input type="checkbox"/> Add
		St. Petersburg FL 33712	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mr	Rolando Davis	2820 17th Avenue South	<input type="checkbox"/> Add
		St. Petersburg FL 33712	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
	J Edwards Construction LLC	2411 Union Street South	<input type="checkbox"/> Add
		St. Petersburg FL 33712	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 TALLAHASSEE, FLORIDA

[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)

(b) The 90th day after the record is filed.


Signature of a member or authorized representative of a member

Jonah Perkins
Typed or printed name of signee

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TALLAHASSEE, FLORIDA