116000040723

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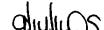
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SECRETARY OF STATE

SECRETARY OF STATE



COVER LETTER

TO:	Registration Se Division of Cor			, .	
·.	Simply So	uthern Sitting - Florida Style, LLC			
SUBJE	.C1:	Name of Limited Liabi	lity Company		
The en	closed Articles of	Amendment and fee(s) are submitted for	or filing.		
Please	return all correspo	ndence concerning this matter to the fo	llowing:		
		Carolyn B. Wright			
		-			
		Fi	irm/Company		-
3732 SE 2nd St					
Address					-
		Ocala, FL 34471			SEC 56
		至 8 四			
		tambra.simplysouthernsittingfl@g	gmail.com I for future annual report notifica	tion)	12000000000000000000000000000000000000
For fur	ther information c	oncerning this matter, please call:	to ratale annual report notino	ion,	ES PER S
Lisa L	. Wingfield		919 604-3477 at ()		37
	Name o	f Person	Area Code Daytime To	elephone Number	r
Enclose	ed is a check for th	ne following amount:			
□ \$2 :	5.00 Filing Fee	Certificate of Status C	5.00 Filing Fee & Certified Copy 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

Simply Southern Sitting - Florida Style, 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 02/26/2016 and assigned Florida document number L16000040723 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: New Registered Office Address: Enter Florida street address Florida

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>	Type of Action
MGR	Simply Southern Sitting, LLC	152 Hazelnut Ln, Smithfield, NC	Add
			■ Remove
			Change
MGR	Lisa L. Wingfield	3043 NC Hwy 42 W, Clayton, N€	
			Remove
			☐ Change
			
			Remove
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			☐ Change

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f an ef Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of a 90th day after the record is filed.
	August 29 2016
Dated	

Page 3 of 3

Filing Fee: \$25.00