

LI6000042862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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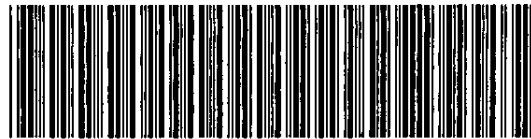
(Business Entity Name)

(Document Number)

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ALABAMA, FLORIDA

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S Warren

MAR 15 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K + W EQUINE RESORT 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:

FELICITY WAUGH

Name of Person

Firm/Company

125 11 S.W. 13th ST.

Address

DAVIE FL. 33325

City/State and Zip Code

Felipingers @ comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FELICITY WAUGH

Name of Person

at (954)

Area Code

439-5832

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

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

K. + W. EQUINE RESORT

(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 MARCH 01, 2016 and assigned Florida document number L16000042862

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:

FELICITY WAUGH

New Registered Office Address:

12511 SW. 13th ST.

Enter Florida street address

DANIE

City

, Florida

33325

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.

Felicity Waugh

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>
<u>MGR</u>	<u>CHEYENNE MOSELEY</u>	<u>13302 WINDING OAK CT.</u>	<input type="checkbox"/> Add
	<u>US. CORP. AGENTS</u>	<u>TAMPA, FL. 33612</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>FELICITY WAUGH</u>	<u>12511 SW. 13th ST.</u>	<input checked="" type="checkbox"/> Add
		<u>DANIE FL 33325</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated MARCH 09, 2017,

February 1968
Signature of a member or authorized

Signature of a member or authorized representative of a member

FELICITY WAUGH
Typed or printed name of signer

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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