

L16000050269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

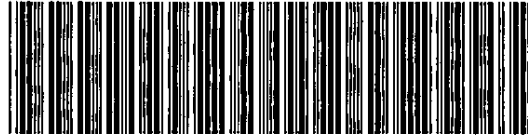
(Business Entity Name)

(Document Number)

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FILED  
16 AUG 26 PM 3:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 26 2016  
J. HARRIS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Nathan Radcliffe 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:

Nathan Radcliffe

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

4455 Friar Tuck Lane

\_\_\_\_\_  
Address

Sarasota, FL 34232

\_\_\_\_\_  
City/State and Zip Code

nathanradcliffe@hotmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nathan Radcliffe

571 216-9194

at ( )

\_\_\_\_\_  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 22, 2016

NATHAN RADCLIFFE  
4455 FRIAR TUCK LANE  
SARASOTA, FL 34232

SUBJECT: NATHAN RADCLIFFE LLC  
Ref. Number: L16000050269

2016 AUG 26 PM 1:56  
TALLAHASSEE, FLORIDA

We have received your document for NATHAN RADCLIFFE 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 216A00015427

2016  
16 AUG 26 PM 3:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Nathan Radcliffe 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 03/10/2016 and assigned  
Florida document number L16000050269.

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**  
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>
AMBR	Nathan Radcliffe	4455 Friar Tuck Lane	<input type="checkbox"/> Add
		Sarasota, FL 34232	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Courtney Gostkowski	4455 Friar Tuck Lane	<input type="checkbox"/> Add
		Sarasota, FL 34232	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

SECURITY  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 10-26-01 BY 60322  
10/26/01

[illegible]

**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 July 18th, 2016

SECRET  
ALL INFORMATION CONTAINED  
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DATE 10-10-2001 BY 60322 UCBAW