Division of Corporations Electronic Filing Cover Sheet

Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : 120070000020

Phone

: (813)435-3176

Fax Number

: (813)333-6358

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JON HAIR MONUMENTAL SCULPTURE, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

Y SULKER

FEB 0 4 2020

If Changing Registered Agent, Signature of New Registered Agent

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JON HAIR MCNUMENTAL SCULPTURE, LLC			
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L16000067636	were filed on 04/05/2016 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	bility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "LL.C."		
Enter new principal offices address, if applicable:	1500 Calming Water Dr.		
(Principal office address MUST BE A STREET ADDRESS)	Unit 2706		
	Fleming Island, FL 32003		
Enter new mailing address, if applicable:	1500 Calming Water Dr.		
(Mailing address MAY BE A POST OFFICE BOX)	Unit 2706 : 22		
	Fleming Island, FL 32003		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new registered		
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 agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is		

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	Address	Type of Action
MGR	JON D. HAIR	1500 Calming Water Dr.	
		Unit 2796	
		Fleming Island, FL 32003	E7.01
			DAdd
			□Remove
			Change
			□Add
			□Remove
			□Change
			CAdd
			□Remove
			Change
			□Add
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			□Remove
			Change

					
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Effective date, if other than fan effective date is listed, the date Note: If the date inserted in thi document's effective date on the	la block does not i	meet the applica	to date of filing or mable statutory filin	ore than 90 days after to grequirements, this	nal) Hing.) Pursuant to 605.0207 date will not be listed as
record specifies a delayed effe d is filed.	ctive date, but no	t un effective ti	me, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
01/28/ Dated		2020			
Jaiwi		·	 ·		
	nut H	MK			

Typed or printed name of signee