

Division of Corporations

Page 1 of 2

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L16000114603

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000153709 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6393

From:

Account Name : EMMANUEL SHEPPARD & CONDON
Account Number : 072720000035
Phone : (850) 433-6581
Fax Number : (850) 433-6162

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

Email Address: LD@westleyrichards.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
WESTLEY RICHARDS AGENCY, LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

((H16000153709 3)))

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Wesley Richards Agency, 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:

Van P. Geeker

Name of Person

Emmanuel Sheppard & Condon

Firm/Company

30 S. Spring Street

Address

Pensacola, Florida 32502

City/State and Zip Code

ld@westleyrichards.com

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

For further information concerning this matter, please call:

Van P. Geeker

850 433-6581
Area Code Daytime Telephone Number

Name of Person

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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Westley Richards Agency, 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 June 6, 2016

Florida document number L16000114603

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)

5247 Gulf Breeze Parkway

Gulf Breeze, Florida 32563

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5247 Gulf Breeze Parkway

Gulf Breeze, Florida 32563

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:

5247 Gulf Breeze Parkway

Enter Florida street address

Gulf Breeze

City

Florida 32563

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

((H16000153709 3)))

((H16000153709 3))) 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> |
|--------------|------------------|----------------------------|--|
| MGR | E. Duke McCaa II | 5247 Gulf Breeze Parkway | <input type="checkbox"/> Add |
| | | Gulf Breeze, Florida 32563 | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
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TALAMON, FLORIDA

(((H16000153709 3))) or information, enter change(s) here: (Attach additional sheets, if necessary.)

16 JUN 23 AM 8:51
SEC. ELECTIONS
ALL AMES. REC. JRM/A

FILED

E. Effective date, if other than the date of filing: _____ (optional)

(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)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

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

Dated Jun 23 2016

E. Duke McCaa II
Signature of a member or authorized representative of a member

E. Duke McCaa II

Typed or printed name of signer