

L16000166358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

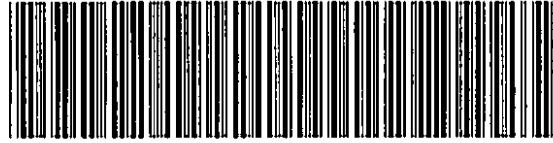
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2021 AUG -6 PM 4:04

2021

Amend  
Name chg

021

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: J3T Sullivan, 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:

Tiffany Sullivan  
Name of Person

Firm/Company

4282 Havencrest Drive  
Address

Pace, FL 32571  
City/State and Zip Code

tiffany @ tiffany sullivan, biz  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tiffany Sullivan at ( 850 ) 380-8838  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



RECEIVED

2021 AUG -6 PM 2:45

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 8, 2021

TIFFANY SULLIVAN  
4282 HAVENCREST DRIVE  
PACE, FL 32571

SUBJECT: J&T SULLIVAN, LLC  
Ref. Number: L16000166358

We have received your document for J&T SULLIVAN, 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):

The specific purpose of the entity must be set forth in the document.

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 721A00012440



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 6, 2021

TIFFANY SULLIVAN  
J & T SULLIVAN, LLC  
4282 HAVENCREST DRIVE  
PACE, FL 32571

SUBJECT: J & T SULLIVAN, PLLC  
Ref. Number: W21000045703

2021 APR 15 PM 2:33  
REGISTRATION  
SPECIAL  
SERVICES

We have received your document for J & T SULLIVAN, PLLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that you are attempting to file a name change and not a conversion. Please contact this office so that your application can be further discussed.

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) 245-6052.

DANIEL L O'KEEFE  
Regulatory Specialist II

Letter Number: 321A00007083

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

J3 T Sullivan, 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 9/5/16 and assigned Florida document number L16000166358.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

J3 T Sullivan, PLLC

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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2021 Aug -6 PM 4:01

FILED

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



D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Article III

Purpose of entity is to operate an attorney office, sell insurance and any all other lawful business.

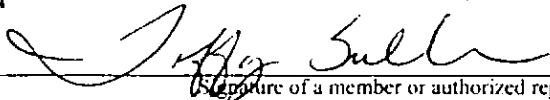
E. Effective date, if other than the date of filing: 3/1/21 (optional)

(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 April 13, 2021.



Signature of a member or authorized representative of a member

Tiffany Sullivan

Typed or printed name of signee

Filing Fee: \$25.00