# L16000182931

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	 e #)
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(Bu	siness Entity Nar	me)
(Do	cument Number)	<u> </u>
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## **COVER LETTER**

TO:	Registration Se Division of Cor				
SUBJI		UDILL, LLC	•		
501551		Name of Lim	ited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
		BRIAN CAUDILL			
			Name of Person		
		BRIAN CAUDILL, LLC	Name of Person		
		<del></del> -	Firm/Company		
1160 77TH AVENUE NORTH					
			Address	<del></del>	
	SAINT PETERSBURG, FL 33702				
		BRIAN.CAUDILL.LLC@G	City/State and Zip Code GMAIL.COM		
		E-mail address: (	to be used for future annual report notif	ication)	
For fur	ther information co	oncerning this matter, please ca	all:		
BRIAN	N CAUDILL		941 840-2567		
Name of Person		Area Code Daytime	Telephone Number		
Enclose	ed is a check for th	e following amount:			
<b>B</b> \$25	5.00 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 Taliahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



October 12, 2019

BRIAN CAUDILL 1160 77TH AVE N ST PETERSBURG, FL 33702

SUBJECT: BRIAN CAUDILL, LLC Ref. Number: L16000182931

We have received your document for BRIAN CAUDILL, 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):

If you are trying to make changes to your manager/member detail, please indicate the changes on page 2(of 3).

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.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 319A00021051

OCT 25 FT 12:

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

23/9 CTT 25 PH 12: 01

#### BRIAN CAUDILL, 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 Florida document number L16000182931	were filed on 9/30/16 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	MICHELLE HANDY, PRESIDENT		
(Principal office address MUST BE A STREET ADDRESS)	BRIAN CAUDILL, VICE PRESIDENT		
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
New Registered Agent's Signature if changing Registered Agent.	Say Cour		
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

<ul> <li>If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being addor removed from our records</u>:</li> <li>MGR = Manager AMBR = Authorized Member</li> </ul>				
i <u>dert</u> Nor	Michelle Handy	1160 774 Avr. N. St. Petesters, Fil 33702	Add	
1010		St. Petustur, Fi 33702	□ Remove	
			Change	
<u>Presid</u>	bert Brian Caudill	116077h Avr N. St. Retusturz, CL 337UZ		
Work		St. Retostary, CL 337UZ	Remove	
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If amending any other in	vimation, enter ena	inge(s) nere.	лиист ишишети	sneets, ij necessury.	,
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Effective date, if other that If an effective date is listed, the date inserted in document's effective date on	ate must be specific and cathris block does not med	annot be prior to det the applicable	ate of filing or more the statutory filing req	(optional) nan 90 days after filing.) uirements, this date w	Pursuant to 605.0207 (2 vill not be listed as th
he record specifies a de The 90th day after th	layed effective dat e record is filed.	te, but not a	n effective time	, at 12:01 a.m. o	n the earlier of:
Dated		2019			
		<u></u>			
	Signature of a me	mber or authorize	d representative of a	member	
DDIANCALINI					
BRIAN CAUDIL		yped or printed no	ame of signee		

Page 3 of 3