

116000210306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

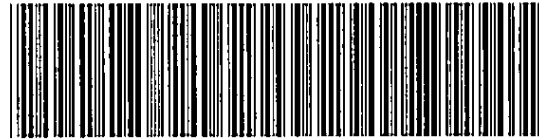
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

A. RIVERS
JAN 24 2022



900376788789

11/23/21--01026--001 **25.00

900376788789
11/23/21--01027--001 **25.00

2022 JAN 20 PM 3:16
CLERK OF STATE
D



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 13, 2021

TRACI L SHAMBURGER
2759 VALENCIA GROVE DR.
VALRICO, FL 33596

SUBJECT: SUGAR MAGNOLIA MANAGEMENT SOLUTIONS, LLC
Ref. Number: L16000210306

We have received your document for SUGAR MAGNOLIA MANAGEMENT SOLUTIONS, LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

WE DO NOT FILE OPERATING AGREEMENTS, PLEASE KEEP FOR YOUR RECORDS.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers
Regulatory Specialist II

Letter Number: 121A00030014



RECEIVED

2022 JAN 20 AM 10:22

FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE
Division of Corporations TALLAHASSEE, FL

January 10, 2022

TRACI L SHAMBURGER SECOND NOTICE
2759 VALENCIA GROVE DR.
VALRICO, FL 33596

SUBJECT: SUGAR MAGNOLIA MANAGEMENT SOLUTIONS, LLC
Ref. Number: L16000210306

We have received your document for SUGAR MAGNOLIA MANAGEMENT SOLUTIONS, LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU FAILED TO MAKE THE CORRECTIONS NOTED IN THE PREVIOUS LETTER

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers
Regulatory Specialist II

Letter Number: 522A00000709

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sugar Magnolia Management Solutions, 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:

Traci L. Shamburger

Name of Person

Sugar Magnolia Management Solutions, LLC

Firm/Company

2759 Valencia Grove Dr

Address

Valrico, FL 33596

City/State and Zip Code

traci@sugarmagnoliamgmt.com

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

For further information concerning this matter, please call:

Johnathan Siebert

813

433-0000

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 Address:

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

(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 11/16/2016 and assigned
Florida document number 110000210306

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.

FILED
2022 JAN 20 PM 3:16
CLERK OF STATE

[illegible]

[illegible]

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.

Dated October 29th, 2021

1/18/22

Signature of a member or authorized representative of a member

Traci Shamburger

Typed or printed name of signee