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### **COVER LETTER**

TO:	Registration Sec Division of Corp				
SUBJE		ood State Farm LLC			
SUBJE	∪1i	Name of Lim	ited Liability Company		
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ndence concerning this matter	to the following:		
		Lance Atwood			
		<del> </del>	Name of Person	<del> </del>	
		•			
			Firm/Company	`	
1508 Remini Court					. <del> </del>
			Address		1
		Saint Augustine Fl 32092			MAR-9 MIII: 15
			City/State and Zip Code		
		lance.atwood.se0q@statefa E-mail address: (	rm.com to be used for future annual report notifi	cation)	
For furth	ner information co	oncerning this matter, please c	•	,	5
Lance A	atwood		386 986-7674		
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed	l is a check for th	e following amount:			
<b>\$</b> \$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 Stat Certified Copy (additional copy is end	us &

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

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lance Atwood State Farm LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	<del> </del>
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 01/05/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
Lance Atwood Insurance LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	11035 Phillips Hwy	70
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, Fl 3225	C RR LAND
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11035 Phillips Hwy Svile #6 Jacksonville Fl 3225	6 5
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		he name of the new
Name of New Registered Agent:		<del></del>
New Registered Office Address:	Enter Florida street address	
	rater r tortuu street aaaress	
	, Florida	7in Cada
	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

## 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 **Title** <u>Name</u> **Address Type of Action** □ Add ☐ Remove ☐ Change ☐ Add □ Remove ☐ Change 四變 □ Remove ☐ Change \_□ Add □ Remove □ Change \_□ Add □ Remove \_□ Change

\_□ Add

☐ Remove

☐ Change

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ffective date, if other than the date an effective date is listed, the date must be lote: If the date inserted in this block ocument's effective date on the Department.	specific and cannot be prior to does not meet the applicab	date of filing or more the	(optional) nan 90 days after filing.) Pursua uirements, this date will no	ant to 605.0207 (3) of be listed as the
e record specifies a delayed e The 90th day after the record	fective date, but not a lis filed.	an effective time	, at 12:01 a.m. on the	e earlier of:
	2017	.•		
ated March 3rd	<del></del>			
ated March 3rd	,			

Page 3 of 3

Filing Fee: \$25.00