

L17000009498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

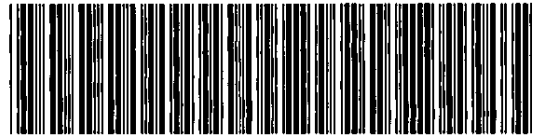
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MAY 24 2017
S. YOUNG

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TALLAHASSEE, FLORIDA
17 MAY -4 PM 12:19

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TALLAHASSEE, FLORIDA
17 MAY -4 AM 11:20



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 10, 2017

SEAN SIMONIC
SIMONIC, SIMONIC, TATNECHT AND ASSOCIATE
8750 PERIMETER PARK BOULEVARD
JACKSONVILLE, FL 32216

SUBJECT: BRANDON FRUSCELLA LLC
Ref. Number: L17000009498

We have received your document for BRANDON FRUSCELLA LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 117A00009263

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ATTACHED CORRECTED AS INSTRUCTED

THANK You

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRANDON FRUSCELLA 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:

SEAN SIMONIC

Name of Person

SIMONIC, SIMONIC, RATNECHT + ASSOC.

Firm/Company

8750 PERIMETER PARK BLVD

Address

JACKSONVILLE, FL. 32216

City/State and Zip Code

SIMONIC@SIMONIC.NET

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

For further information concerning this matter, please call:

DEBORAH ALEXA

Name of Person

at (904) 928-1040

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount: (PREVIOUSLY SUBMITTED)

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BRANDON FRUSCELLA 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 01-11-17 and assigned
Florida document number L17000009498.

This amendment is submitted to amend the following:

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

BRANDON WEST LLC

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.

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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

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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.

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

Dated 5/18/17

Brandon West

dotloop verified
05/18/17 10:56PM EDT
AGP3-GHKT-CWX6-ZYNM

Signature of a member or authorized representative of a member

Brandon West.

Typed or printed name of signee