

LIT0000 13214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

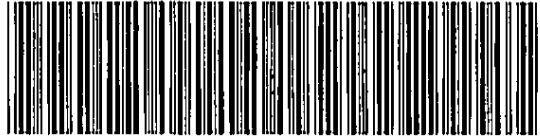
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/01/19--01014--011 **25.00

S TALLENT
MAR 27 2019

FILED
MAR 27 2019
MAR 27 2019

Amend &
N/C



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2019

FORREST JOHNSON
JOHNSON HONEY DO'S
235 PINE ISLAND RD.
MERRITT ISLAND, FL 32953

SUBJECT: JOHNSON HONEY DO'S, LLC
Ref. Number: L17000013214

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE THE AMENDMENT FORM ATTACHED FOR CLARIFICATION PURPOSES AND RESUBMIT.

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.

Susan Tallent
Regulatory Specialist II

Letter Number: 219A00005033

RECEIVED

2019 MAR 25 PM 2:52

SECRETARY OF STATE
TALLANT@FOS.C.FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Johnson Honey Do's.
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:

Forrest Johnson
Name of Person

Johnson Honey Do's.
Firm/Company

1235 Pine Island Rd.
Address

Merritt Island, Florida 32953.
City/State and Zip Code

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

For further information concerning this matter, please call:

Forrest Johnson at (352) 207-7629
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" 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

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

Johnson Honey Do's, 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 March 19, 2019 and assigned
Florida document number L17000013214

This amendment is submitted to amend the following:

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

Johnson Honey Do's, "LLC"

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1235. PINE Island Rd.
Merritt Island, Florida.
32953

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1235 PINE Island Rd.
Merritt Island ~~FL~~ Florida.
32953

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:

Forrest Johnson

New Registered Office Address:

1235 PINE Island Rd.
Enter Florida street address
Merritt Island Florida 32953
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.

Forrest Johnson

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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[illegible]

(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)

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.

Faust Johnson

Forrest Johnson

Typed or printed name of signee