

L170000 43 192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

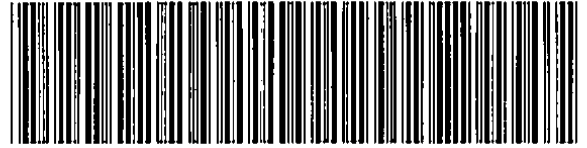
(Business Entity Name)

(Document Number)

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2019 JUL 26 AM 10:26
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JUL 31 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Button Blue, 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:

Carrie A Mizell

Name of Person

Firm/Company

3401 Turkey Trot Trl

Address

Hilliard, FL 32046

City/State and Zip Code

mrsccarriemizell@yahoo.com

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

For further information concerning this matter, please call:

Carrie A Mizell

904 424-5261

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/COURIER ADDRESS:

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

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

BUTTON BLUE, 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 2/23/2017 and assigned
Florida document number L17000043192.

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)

3401 Turkey Trot Trl

Hilliard, FL 32046

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3401 Turkey Trot Trl

Hilliard, FL 32046

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:

Carrie A. Mizell

New Registered Office Address:

3401 Turkey Trot Trl

Enter Florida street address

Hilliard

City

Florida 32046

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>
MGR	Leslie Gressman	45165 Gressman Dairy Rd	<input type="checkbox"/> Add
		Callahan, FL 32011	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Melissa Sutton	45070 Heritage Place	<input type="checkbox"/> Add
		Callahan, FL 32011	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Carrie Mizell	3401 Turkey Trot Trl	<input checked="" type="checkbox"/> Add
		Hilliard, FL 32046	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

EIN will be changing because the entity has been sold effective 7/23/19. Please remove current EIN.

A new EIN will be added when it becomes available from the IRS.

The signatures below are from one of the current MGR and the new MGR.

7/23/2019

E. Effective date, if other than the date of filing: _____ **(optional)**

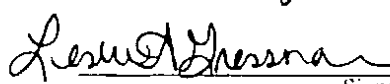
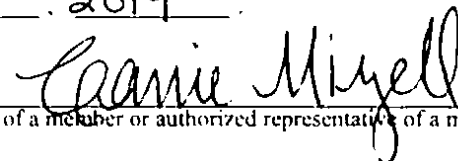
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

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.

Dated July 23, 2019.

Signature of a member or authorized representative of a member

Leslie Gressman

Carrie Mizell

Typed or printed name of signee