

L17000079398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

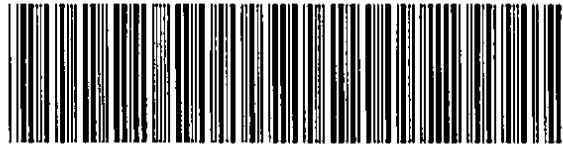
(Business Entity Name)

(Document Number)

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FILED
17 AUG 11 PM 1:18
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

RECEIVED
2017 AUG 11 AM 9:00
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

S. WARREN

AUG 14 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Prodigal Prevention Partners, 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:

Callhan Garrett, Esq.

Name of Person

Counsel for Prodigal Prevention Partners, LLC (for Amended Articles)

Firm/Company

400 N McClurg Ct #3910

Address

Chicago, IL 60611

City/State and Zip Code

callhangarrettesq@gmail.com

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

For further information concerning this matter, please call:

Callhan Garrett, Esq.

239

4345756

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**

Prodigal Prevention Partners, 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 4/10/17 and assigned
Florida document number L17000079398.

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.~~

If Changing Registered Agent, Signature of New Registered Agent

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AUG 11 PM 1:18
CLERK OF DISTRICT COURT
JANESVILLE, WISCONSIN

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Remove
7 AUG 11 01:18
Change
Add
Remove

[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:

Dated August 3 2017

Callaghan

Callhan Garrett, Esq

Typed or printed name of signee

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17 AUG 11 PM 1:18
U.S. DISTRICT COURT
MAYAGUEZ, PUERTO RICO