L17000093092

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(Business Entity Name)
(Document Number)
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2023 SEP -6 PH 5: 25

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of 9/20/2003

COVER LETTER

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ı		VER RETREAT LLC		4.
SUBJE	.СТ:	Name of Lim	Name of Limited Liability Company	
The enc	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	return all correspo	ndence concerning this matter	to the following:	
		HANK WEEKS		
		SISTER RIVER RETREAT LLC Name of Limited Liability Company ed Articles of Amendment and (ec(s) are submitted for filing. ITANK WEEKS Name of Person SISTER-RIVER RETREAT LLC Firm/Company 11666 STEELFIELD ROAD Address VERNON, FLORIDA 32462 City/State and Zip Code B-mail address: (to be used for future annual report notification) information concerning this matter, please call: EEKS Name of Person Address VERNON FLORIDA 32462 City/State and Zip Code B-mail address: (to be used for future annual report notification) information concerning this matter, please call: EEKS Name of Person Area Code Daytime Telephone Number State Certificate of Status & Certified Copy (additional copy is enclosed) Street Address: Street Address:		
		SISTER-RIV ER-RETREA	The Hank Weeks	s Remodeling & Repair LCC
			Firm/Company	
		11666 STEELFIELD ROA	.D	
			Address	
	VERNON, FLORIDA 324		162	
		E-mail address: (to be used for future annual report not	ification)
For furt	her information c	oncerning this matter, please ca	ill:	
HANK	WEEKS		at (
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclose	ed is a check for th	ne following amount:		
	5.00 Filing Fee	☐ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
	Mailing Addres Registration S Division of C P.O. Box 632	Section orporations	Street Address: Registration So Division of Co The Centre of	rporations

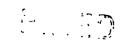
Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)



HANK WEEKS REMODELING & REPAIR LLC

2023 SEP -6 PM 5: 25

(A Fiorida Limiteu)	Jaointy Company)	
The Articles of Organization for this Limited Liability Company Florida document number L17000093092	were filed on APRIL 26, 201	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	11666 STEELFIELD RD	
(Principal office address MUST BE A STREET ADDRESS)	VERNON, FLORIDA 3246	52
Enter new mailing address, if applicable:	11666 STEELFIELD ROAF)
(Mailing address MAY BE A POST OFFICE BOX)	VERNON, FLORIDA 32462	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>ent</u>	er the name of the new registered
New Registered Office Address:	Enter Florida street add	leave.
	City	Florida
New Registered Agent's Signature, if changing Registered Agent:	•	·
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ec to act in this capacity. I performance of my duties, provided for in Chapter 60.	and I am familiar with and 5, F.S. Or, if this document is

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>	Address	Type of Action
			□Add
			□Remove
			☐Change
			□Add
			√. □Remove
			□Change
,			□Add
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			Change
			□Add
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Note:	AUGUST 28, 2023 (optional) fective date, if other than the date of filing: [Sective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
recor	rd 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 led.
Dated	AUGUST 28, 2023
	$\gamma $ or $\gamma $
	Signature of a member of authorized representative of a member

• • • •

Filing Fee: \$25.00