# 117000146322

(Red	questor's Name)	-		
(Address)				
(Address)				
(City	//State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
JOCI)	Jument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



08/31/18--01003--019 \*\*25.00

MAUG 31 PM 2: 98

NCaussauf 8/31/18



# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Live Law Julice Bar and More
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:
Rick WKnolle
ive law Svice Bur and More Firm/Company
532. W. GADINST.
PenSacola F. 32502
E-mail address: (to be used for future amual (report notification)
For further information concerning this matter, please call:
Name of Person at (SSO) 782-44400  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Book Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)  \$\Bigcup \$30.00 Filing Fee & Book 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

B. If amending the registered agent and/or registered office address here:  Name of New Registered Agent:  New Registered Office Address:	Enter Florida street address
Name of New Registered Agent:	
Name of New Registered Agent:	
registered agent and/or the new registered office address here:	dress on our records, enter the name of the
	dress on our records, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
Enter new mailing address, if applicable:	1.
<del></del>	
(Principal office address MUST BE A STREET ADDRESS)	A 2
Enter new principal offices address, if applicable:	74 134 144
The new name must be distinguishable and contain the words "Limited Liability Comp	any," the designation "LLC" or the abbreviation "L.L.C."
A. If amending name, enter the new name of the limited liability con	<u>npany here</u> :
This amendment is submitted to amend the following:	
Florida document number L17000146323 V	` ,
The Articles of Organization for this Limited Liability Company were fil	ed onand assigned
(A Florida Limited Liability C	ow appears on our records.) Company)
GNAME OF THE LIMITED LIABILITY COMPANY AS IF N	0111009

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 = Au	thorized Member		
Title	<u>Name</u>	Address	Type of Action
Treasure	Tramy Vanda Hey	1150 Fort Pickens R. Pensacola, Fl. 3256	√ ⊠cAdd
		Vensa co/a, tl. 3256	□ Remove
	-1.		Change
Secretary	James El bert Barrai	x 4152 Sundance Wa Holt F1 32564	MAdd
·		Holf F1 32564	V □ Remove
			🗆 Change
<del></del>			Add
			Remove
			<u> </u>
			—□Add ; ··· → —□Eemove
			Change
			O Add
			□ Remove
			Change
			🗆 Add
			□ Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional shee	
	<u> </u>
	P 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	2: 44
	· · · · · · · · · · · · · · · · · · ·
Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 9  Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	
the record specifies a delayed effective date, but not an effective time, at ) The 90th day after the record is filed.	12:01 a.m. on the earlier of:
Dated 8/31/18  **CAUX la U/e  / Signature of a member or anthorized representative of a mem	ber
Jammy Vander Hey Typed or printed hame of signee	

Page 3 of 3

Filing Fee: \$25.00