

L17000150597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

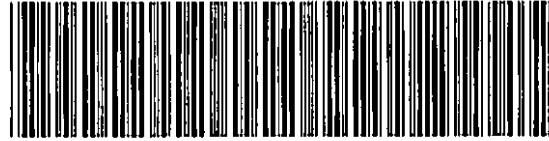
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing. - AMENDED forms enclosed

Please return all correspondence concerning this matter to the following:

Belinda Cunningham
Name of Person

Flowers by Frances LLC
Firm/Company

2087 Drew St, Clearwater, FL 33765
Address

Cell phone:

410-440-6088

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

Flowers by Frances 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 07/13/2017 and assigned Florida document number L17000150597.

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)

2087 Drew Street
Clearwater FL 33765

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2087 Drew Street
Clearwater FL 33765

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:

Belinda A Cunningham

New Registered Office Address:

2087 Drew Street

Enter Florida street address

Clearwater

City

Florida

33765

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.

Belinda Cunningham
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	Belinda Cunningham	2087 Drew Street	<input checked="" type="checkbox"/> Add
		Clearwater FL 33765	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	FRANCES WELT	2087 Drew Street	<input type="checkbox"/> Add
		Clearwater FL 33765	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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

E. Effective date, if other than the date of filing: July 1 2020 (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 1 , 2020 .

Belinda Cunningham
Signature of a member or authorized representative of a member

Belinda CUNNINGHAM
Typed or printed name of signee