

217000157819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

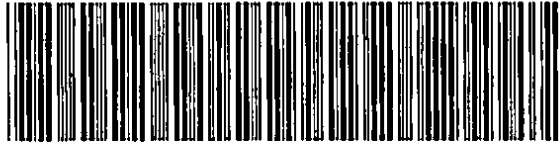
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 AUG - 1 AM 7:51
ST. LOUIS, MO. STATE
FALL MASSACHUSETTS
LONDON

AUG 03 2017
J SHIVERS

COVER LETTER

Registration Section
Division of Corporations

Richards, LLC

SUBJECT: _____
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:

Steven Richards

Name of Person

Richards LLC

Firm/Company

210 N Tubb St #569

Address

Oakland, FL 34760

City/State and Zip Code

srinulchfl@gmail.com

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

For further information concerning this matter, please call:

Steven Richards

407

490-9799

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**

Richards 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 7/24/2017 and assigned
Florida document number L17000157819.

This amendment is submitted to amend the following:

. 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:

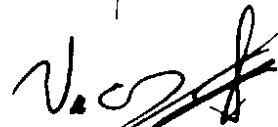
Mailing address MAY BE A POST OFFICE BOX)

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:

<u>Name of New Registered Agent:</u>	<u>Voight, PA</u>
<u>New Registered Office Address:</u>	<u>7680 Universal Blvd, St 100</u>
	<small>Enter Florida street address</small>
	<u>Orlando</u> , <u>Florida</u> <u>32819</u>
	<small>City Zip Code</small>

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

impending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
removed from our records:

GR = Manager

ABR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
ABR	Karyn Zelsman-Richards	210 N Tubb St #569	<input checked="" type="checkbox"/> Add
		Oakland, FL 34760	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Steven Richards	210 N Tubb St #569	<input type="checkbox"/> Add
		Oakland, FL 34760	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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17 AUG - 1 AM 7:55,
SECTION 1001 OF STAFF,
MAIL AND ASSISTANT COMD.

17 AUG - 1 AM 7:51,
S. ON HIGH W. STAY
FALL ASST. T. COMB.

the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

- 1) The 90th day after the record is filed.

James G. H. O.

Steven Richards

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Filing Fee: \$25.00