

L17000170302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

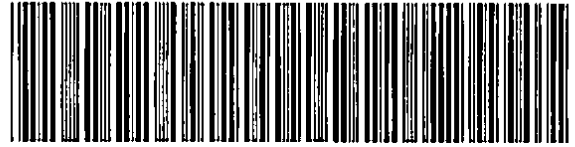
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FILED  
2019 FEB 19 PM 3:03  
SPT - 1016-19-002

Amend

FEB 23 2019

LALBRITTON

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Brandon J. Stubbs, 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:

Brandon J. Stubbs

\_\_\_\_\_  
Name of Person

Brandon J. Stubbs, LLC

\_\_\_\_\_  
Firm/Company

5640 Fountain Lake Circle, #227

\_\_\_\_\_  
Address

Bradenton, FL 34207

\_\_\_\_\_  
City/State and Zip Code

brandonstubbs@comcast.net

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

For further information concerning this matter, please call:

Brandon J. Stubbs

941

726-5976

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**

Brandon J. Stubbs, LLC

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

FILED  
2019 FEB 19 PM 3:03  
SCL

The Articles of Organization for this Limited Liability Company were filed on 08/09/2017 and assigned

Florida document number L17000170302

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)**

5640 Fountain Lake Circle, #227

Bradenton, FL 34207

**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**

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>
AMBR	ANTONIO M. FERNANDEZ	3864 DAVIS BLVD.	<input type="checkbox"/> Add
		SARASOTA, FL 34232	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ROY HARDING CHOATE, JR	609 KING STREET	<input type="checkbox"/> Add
		NOKOMIS, FL 34275	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	BRETT MICHAEL BURKETT	3935 ROCKEFELLER DR.	<input checked="" type="checkbox"/> Add
		SARASOTA, FL 34231	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ANDRAS STADLER	2814 MAYFLOWER ST	<input checked="" type="checkbox"/> Add
		SARASOTA, FL 34231	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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:

(b) The 90th day after the record is filed.

Buck Sh

Typed or printed name of signee