

L17000195272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

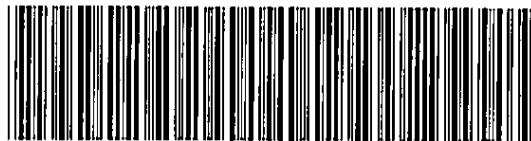
(Business Entity Name)

(Document Number)

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SEAL OF THE STATE
TALLAHASSEE, FLORIDA

SEP 12 2019

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SISTER'S SOUTHERN CHARM BOUTIQUE & TIQUES, 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:

RONALD D DAVIS

Name of Person

G & D FINANCIAL SERVICES

Firm/Company

1063 HWY 90

Address

CHIPLEY, FLORIDA 32428

City/State and Zip Code

rdchipley@aol.com

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

For further information concerning this matter, please call:

RONALD D DAVIS

at (850)

638-5663

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**

SISTER'S SOUTHERN CHARM BOUTIQUE & TIQUES, 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 SEPTEMBER 20, 2017 and assigned
Florida document number L17000195272.

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)

827 MAIN STREET

CHIPLEY, FLORIDA 32428

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

827 MAIN STREET

CHIPLEY, FLORIDA 32428

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:

GINA PIPPIN

New Registered Office Address:

1923 BENTLEY ROAD

Enter Florida street address

COTTONDALE

Florida

32428

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> |
|--------------|------------------|---|--|
| MGR | TAMMY A AYERS | 1331 COLEMAN AVE CHIPLEY, FL 32428 | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | STEPHEN W PIPPIN | 1923 BENTLEY ROAD COTTONDALE, FL 32431 | <input checked="" type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
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| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

****SEE ATTACHED RESOLUTIONS AND ASSIGNMENT OF MEMBERSHIP INTEREST

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.

E. Effective date, if other than the date of filing: _____ (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 AUGUST 26, 2019

Signature of a member or authorized representative of a member

GINA PIPPIN

Typed or printed name of signee

**RESOLUTION OF THE
MEMBERS OF
SISTER'S SOUTHERN CHARM BOUTIQUES & TIQUES, LLC**

WHEREAS, Tammy A. Ayers, member, desires to assign certain membership interests of Sister's Southern Charm Boutique & Tiques, LLC (the "Company") effective upon execution of this Resolution;

NOW, THEREFORE, IT IS RESOLVED and we, Gina M. Pippin and Tammy A. Ayers, the members, do hereby consent to the following assignments of membership interests of the Company:

50% from Tammy A. Ayers to Janae E. Ritter;

FURTHER RESOLVED that after the assignment of membership interests described herein above, the membership in the Company shall be as follows:

| <u>MEMBER</u> | <u>MEMBERSHIP PERCENTAGE</u> |
|-----------------|----------------------------------|
| GINA M. PIPPIN | 50% |
| JANAE E. RITTER | <u>50%</u> |
| TOTAL | 100% |

FURTHER RESOLVED, that Tammy A. Ayers shall no longer be authorized to sign checks and withdraw funds belonging to or held in the name of the Company in any financial institution, including checks payable to the Company and withdrawals in favor of the Company or to Tammy A. Ayers. Tammy A. Ayers shall also no longer have the authority to obtain cash and checks made payable to the Company and to negotiate and otherwise transfer such checks.

{SIGNATURES ON FOLLOWING PAGE}

Dated this the 22nd day of August, 2019.

[Signature]
WITNESS

[Signature]
GINA M. PIPPIN

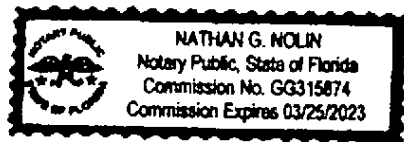
[Signature]
WITNESS

[Signature]
TAMMY A. AYERS

STATE OF FLORIDA }
 }
COUNTY OF WASHINGTON }

I, the undersigned, a Notary Public in and for said County in said State, hereby certify that TAMMY A. AYERS and GINA M. PIPPIN, whose names are signed to the foregoing assignment, and who are known to me, acknowledged before me, that being informed of the contents of the foregoing assignment, they executed the same voluntarily as of the day the same bears date.

Dated this the 22nd day of August, 2019.

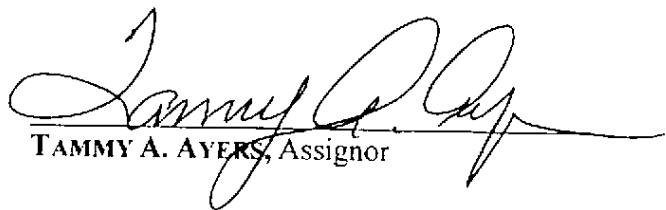


[Signature]
NOTARY PUBLIC
MY COMMISSION EXPIRES: 03-25-2023

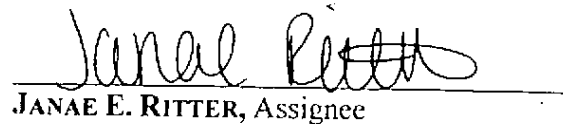
**ASSIGNMENT OF MEMBERSHIP INTEREST IN
SISTER'S SOUTHERN CHARM BOUTIQUES & TIQUES, LLC**

I, **TAMMY A. AYERS**, an individual (the "Assignor"), do hereby give, assign, transfer my Fifty percent (50%) membership interest in **SISTER'S SOUTHERN CHARM BOUTIQUES & TIQUES, LLC**, a Florida limited liability company, to **JANAE E. RITTER** (the "Assignee"). The total of said interests being transferred are Fifty Percent (50%) of the total ownership interest of **SISTERS SOUTHERN CHARM BOUTIQUES & TIQUES, LLC**. Assignee shall be entitled to receive Fifty Percent (50%) of the losses, profits or other income, and the return of capital of the LLC.

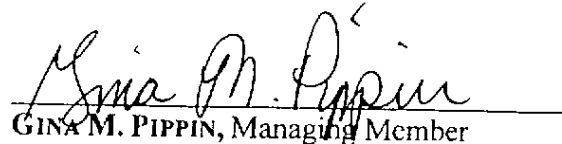
IN WITNESS WHEREOF, the undersigned has executed this Assignment as of the ____ day of August, 2019.


TAMMY A. AYERS, Assignor

I hereby acknowledge my acceptance and receipt of the above assignment:


JANAE E. RITTER, Assignee

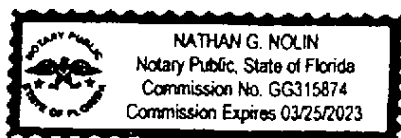
I hereby acknowledge the above assignment as an existing member holding a Fifty Percent (50%) membership interest in **SISTER'S SOUTHERN CHARM BOUTIQUES & TIQUES, LLC**:

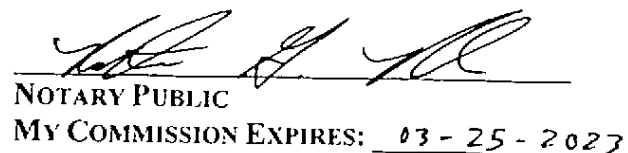

GINA M. PIPPIN, Managing Member

STATE OF FLORIDA }
 }
COUNTY OF WASHINGTON }

I, the undersigned, a Notary Public in and for said County in said State, hereby certify that **TAMMY A. AYERS**, **JANAE E. RITTER**, and **GINA M. PIPPIN**, whose names are signed to the foregoing assignment, and who are known to me, acknowledged before me, that being informed of the contents of the foregoing assignment, they executed the same voluntarily as of the day the same bears date.

Dated this the 22nd day of August, 2019.

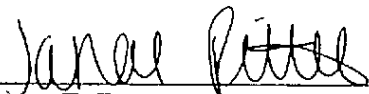



NOTARY PUBLIC
MY COMMISSION EXPIRES: 03-25-2023

**ASSIGNMENT OF MEMBERSHIP INTEREST IN
SISTER'S SOUTHERN CHARM BOUTIQUES & TIQUES, LLC**

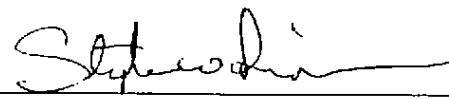
I, **JANAE E. RITTER**, an individual (the "Assignor"), do hereby give, assign, transfer my Fifty percent (50%) membership interest in **SISTER'S SOUTHERN CHARM BOUTIQUES & TIQUES, LLC**, a Florida limited liability company, to **STEVEN W. PIPPIN** (the "Assignee"). The total of said interests being transferred are Fifty Percent (50%) of the total ownership interest of **SISTERS SOUTHERN CHARM BOUTIQUES & TIQUES, LLC**. Assignee shall be entitled to receive Fifty Percent (50%) of the losses, profits or other income, and the return of capital of the LLC.

IN WITNESS WHEREOF, the undersigned has executed this Assignment as of the 22 day of August, 2019.



JANAE E. RITTER, Assignor

I hereby acknowledge my acceptance and receipt of the above assignment:



STEPHEN W. PIPPIN, Assignee

I hereby acknowledge the above assignment as an existing member holding a Fifty Percent (50%) membership interest in **SISTER'S SOUTHERN CHARM BOUTIQUES & TIQUES, LLC**:



GINA M. PIPPIN, Managing Member

STATE OF FLORIDA }
 }
COUNTY OF WASHINGTON }

I, the undersigned, a Notary Public in and for said County in said State, hereby certify that **JANAE E. RITTER**, **STEVEN W. PIPPIN**, and **GINA M. PIPPIN**, whose names are signed to the foregoing assignment, and who are known to me, acknowledged before me, that being informed of the contents of the foregoing assignment, they executed the same voluntarily as of the day the same bears date.

Dated this the 22 day of August, 2019.



NOTARY PUBLIC
MY COMMISSION EXPIRES: 03-25-2023

**RESOLUTION OF THE
MEMBERS OF
SISTER'S SOUTHERN CHARM BOUTIQUES & TIQUES, LLC**

WHEREAS, Janae E. Ritter, member, desires to assign certain membership interests of Sister's Southern Charm Boutique & Tiques, LLC (the "Company") effective upon execution of this Resolution;

NOW, THEREFORE, IT IS RESOLVED and we, Gina M. Pippin and Janae E. Ritter, the members, do hereby consent to the following assignments of membership interests of the Company:

50% from Janae E. Ritter to Stephen W. Pippin;

FURTHER RESOLVED that after the assignment of membership interests described herein above, the membership in the Company shall be as follows:

| <u>MEMBER</u> | <u>MEMBERSHIP PERCENTAGE</u> |
|-------------------|----------------------------------|
| GINA M. PIPPIN | 50% |
| STEPHEN W. PIPPIN | <u>50%</u> |
| TOTAL | 100% |

{SIGNATURES ON FOLLOWING PAGE}

Dated this the _____ day of August, 2019.

WITNESS

GINA M. PIPPIN

WITNESS

JANAE E. RITTER

STATE OF FLORIDA

COUNTY OF WASHINGTON

I, the undersigned, a Notary Public in and for said County in said State, hereby certify that JANAE E. RITTER and GINA M. PIPPIN, whose names are signed to the foregoing assignment, and who are known to me, acknowledged before me, that being informed of the contents of the foregoing assignment, they executed the same voluntarily as of the day the same bears date.

Dated this the 22 day of AUGUST, 2019.

NOTARY PUBLIC

MY COMMISSION EXPIRES: 03-25-2023