117000197424

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COVER LETTER

TO: Registra Division	tion Section of Corporations		· .			
	en Jim Stone, LLC.		•			
SUBJECT:	-· -	Name of Limit	ted Liability Company			
The enclosed Art	cles of Amendment	and fee(s) are subn	nitted for filing.			
Please return all	orrespondence conc	erning this matter t	o the following:			
	Steven J	im Stone				
			Name of Person			
	Steven J	im Stone, LLC				
			Firm/Company			
	1746 East Silver Star Road, Station 555					
			Address	<u> </u>		
	Ocoee, F	L 34761				
			City/State and Zip Code			
	stevenjim	stone@gmail.com				
		E-mail address: (to	o be used for future annual report no	otification)		
For further inform	nation concerning th	s matter, please ca	11:			
Steven Jim Stone			407 986-0889			
	Name of Person		at () Area Code Dayti	me Telephone Number		
Enclosed is a che	ck for the following	amount:				
■ \$25.00 Filing		Filing Fee & ficate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

Steven Jim Stone, LLC.						
(Name of the Limited	d Liability Compa A Florida Limited I	ny as it now appears on our re- liability Company)	cords.)			
The Articles of Organization for this Limited Lia Florida document number L17000197424	bility Company	were filed on September 22	2, 2017	_ and assigned		
This amendment is submitted to amend the follow	wing:					
a. If amending name, enter the new name of t	the limited liab	ility company here:				
N/A						
he new name must be distinguishable and contain the wor	rds "Limited Liabil	ity Company," the designation "	LLC" or the abbro	viation "L.L.C."		
Enter new principal offices address, if applicable:		533 Bowman Avenue				
Principal office address MUST BE A STREET		Daytona Beach, FL 32114				
			-			
Enter new mailing address, if applicable:		1746 East Silver Star Road		F-!!		
(Mailing address MAY BE A POST OFFICE BOX)		Station 555	*},	P Ti		
	<u> </u>	Ocoee. Fl. 34761	2.5	ů 📆		
B. If amending the registered agent and/o	4.7		ords, enter th	e name of the		
Name of New Registered Agent:						
New Registered Office Address:	533 Bowman A	- <u></u>				
		Enter Florida street aa	ldress			
	Daytona Beach		. Florida	4		
		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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			
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<mark>ctive</mark> effecti	date, if other than ive date is listed, the date	the date of fills must be specific a	ing:and cannot be prid	or to date of filing o	more than 90 days	optional) safter filing.) Purs	uant to 605.02
e: If t	the date inserted in the t's effective date on the	is block does no	t meet the appl	icable statutory fi			
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	Steven Jim Stone		Typed or prir	ited name of signed		21 PH 5: 04	

Filing Fee: \$25.00