

L17 000 243 993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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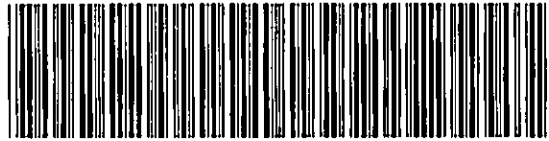
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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JUN 13 2018

Carlotta Appleman Thacker  
cathacker@HSMcLaw.com

# HAND ARENDALL HARRISON SALE LLC

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304 MAGNOLIA AVENUE ■ PANAMA CITY, FLORIDA 32401  
(850) 769-3434 ■ Facsimile: (850) 769-6121

June 6, 2018

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: South Oak Insurance Agency, LLC  
Document #L17000243993

To Whom It May Concern:

Enclosed please find the Articles of Amendment of South Oak Insurance Agency, LLC.  
for filing. Also enclosed is a check for the filing fee.

If you have any questions, please do not hesitate to contact us.

Sincerely,



Amy Meyer, Paralegal  
Carlotta Appleman Thacker, Esq.

/am

Enclosures: As stated.

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

SOUTH OAK INSURANCE AGENCY, 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 November 28, 2017, and assigned Florida document number L17000243993.

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)

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*

*City*

*Florida*

*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	AMANDA OAKES	22209 Fox Glen Trace, Panama City Beach, FL 32413	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JASON OAKES	22209 Fox Glen Trace, Panama City Beach, FL 32413	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JASON OAKES	22209 Fox Glen Trace, Panama City Beach, FL 32413	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	TYLER C. JONES	542 Durham Drive, Birmingham, AL 35209	<input checked="" type="checkbox"/> Add
			<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

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

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SECRETARY OF STATE  
DIVISION OF CORPORATION

**F. 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 this 31<sup>st</sup> day of May, 2018.

  
JASON OAKES, MANAGER / member

  
\_\_\_\_\_  
TYLER C. JONES. member

  
AMANDA OAKES, MANAGER