

217000 255008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

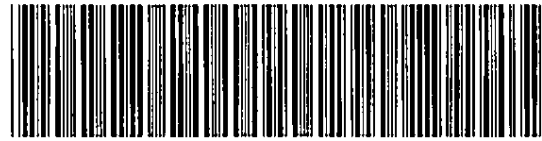
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer: 12/20/17

Change eff. date per James

McCall (dw)

Office Use Only



500306695485

12/19/17--01021--028 **25.00

FILED
17 DEC 19 PM 3:53
U.S. DISTRICT COURT
EAST DISTRICT OF CALIFORNIA

S. WARREN

DEC 20 2017

The law office of
C. JAMES MCCALL,
LLC

Suite 202
3604 University Boulevard South
Jacksonville, Florida 32216

(904)425-4500
FAX (904)425-4501

Dear Madam/Sir:

BY EXPRESS MAIL

December 18, 2017

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

*SUBJECT: McCall & Erler LLC
Florida Document Number L17000255008*

Dear Madam/Sir:

The enclosed Articles of Amendment are submitted for filing. Also, please find enclosed a check in the amount \$25.00 to cover the filing fees.

For further information regarding this matter, please call me on my cell at 904-955-6618.

Thank you.

Very Truly Yours,


C. James McCall, Esq.

Enclosure

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

McCall & Erler 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 December 13, 2017 and assigned
Florida document number L17000255008.

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

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

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DEC 19 2017
3:53
STATE
FLORIDA

MGR = Manager
AMBR = Authorized Member

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☐ Change
☐ Add
☐ Remove
☐ Change

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

Change effective date of LLC to 12/18/2017
instead of 01/01/2018

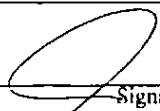
E. Effective date, if other than the date of filing: _____ (optional)

(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 December 18, 2017


Signature of a member or authorized representative of a member

C. James McCall

Typed or printed name of signer

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CLERK OF THE
STATE
TALLAHASSEE, FLORIDA