

L17000262470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

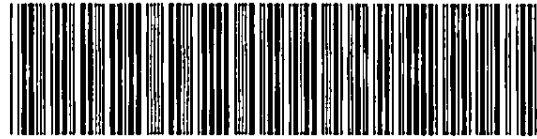
(Business Entity Name)

(Document Number)

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Y SULKER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: KB Pools and Supplies 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:

Denielle Ridings

Name of Person

KB Pools and Supplies LLC

Firm/Company

11 White Birch Ln.

Address

Palm Coast, FL 32164

City/State and Zip Code

deniellehanna@gmail.com

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

For further information concerning this matter, please call:

Denielle Ridings

386

585-9104

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 10, 2018

DENIELLE RIDINGS
11 WHITE BIRCH LN
PALM COAST, FL 32164

SUBJECT: KB POOLS AND SUPPLIES, LLC
Ref. Number: L17000262470

We have received your document for KB POOLS AND SUPPLIES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 018A00000667

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

KB POOLS AND SUPPLIES, 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 12/27/17 and assigned Florida document number L17000262470.

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:

DENIELLE REDINGS

New Registered Office Address:

11 WHITE BIRCH LN

Enter Florida street address

PALM COAST

City

Florida

32164

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	Denielle Hanna	11 White Birch Ln.	<input type="checkbox"/> Add
		Palm Coast, FL 32164	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Denielle Ridings	11 White Birch Ln.	<input checked="" type="checkbox"/> Add
		Palm Coast, FL 32164	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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28 JAN 31 PM 2:18
FLORIDA
STATE
SOCIETY
OF
AMERICAN
HISTORIANS

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

18 JAN 34 P.
S. H. HANCOCK
ALLAN HASSLE.

18 JAN 34 PM 2:49

E. Effective date, if other than the date of filing: January 1, 2018 (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 January 4, 2018

K. B.

Signature of a member or authorized representative of a member

Korby Burdick

Typed or printed name of signee