

LIB0000002549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

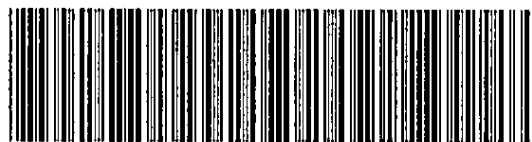
(Business Entity Name)

(Document Number)

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09/10/18--01033--036 **80.00

9/13/18 25

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Londad's 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:

Robert D Mobley

Name of Person

Londad's LLC

Firm/Company

355 S Dr Martin Luther King Jr Blvd

Address

Daytona Beach, Florida 32114

City/State and Zip Code

rrmobley99@gmail.com

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

For further information concerning this matter, please call:

Robert D Mobley

386

341-1224

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

Londad's LLC

The Articles of Organization for this Limited Liability Company were filed on 01/10/2018 and assigned Florida document number L18000008549

Page 1 of 3

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>
AMBR	Johson, Richard	116 CAROLINA LAKE DR #301	<input type="checkbox"/> Add
		DAYTONA BEACH, FL 32114	<input checked="" 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
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			<input type="checkbox"/> Change

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

Please Change the Address of Robert D Mobley from 355 SE MARTIN LUTHER KING BLVD

to 355 S Martin Luther King Jr Blvd

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

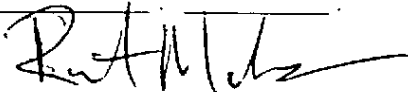
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 _____

9/7/2018



Signature of a member or authorized representative of a member

ROBERT D MOBLEY

Typed or printed name of signee