## 11800000 8549

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## **COVER LETTER**

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Div	ision of Cor	porations		
SUBJECT:	Londad's L	LC		
		Name of Lim	nited Liability Company	
The enclosed	l Articles of a	Amendment and fee(s) are sub	emitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Robert D Mobley		
		·	Name of Person	<u> </u>
		Londad's LLC		
			Firm/Company	
		355 S Dr Martin Luther I	King Jr Blvd	
			Address	
		Daytona Beach, Florida	32114	
		rrmobley99@gmail.com	City/State and Zip Code	1
			to be used for future annual report notific	cation)
For further in	iformation co	oncerning this matter, please ca	•	,
Robert D M	obley		386 341-1224 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	e following amount:		
□ \$25.00 Fi	iling Fce	☐ \$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:

TO:

Registration Section

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

Londad's LLC			
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)		
The Articles of Organization for this Limited Liability Comp	pany were filed on 01/10/2018	and assigned	
Florida document number L18000008549			
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 l	Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS	<u> </u>		
Enter new mailing address, if applicable:	Robert D Mobley		
Mailing address MAY BE A POST OFFICE BOX)	355 S Dr Martin Luther King Jr Blvd		
2	Daytona Beach, Florida 32114		
<ol> <li>If amending the registered agent and/or registere egistered agent and/or the new registered office address</li> </ol>	d office address on our records, <u>ent</u> <u>here</u> :	er the name of the no	
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

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> Johson, Richard	Address 116 CAROLINA LAKE DR #301	Type of Action
AMBR			
		DAYTONA BEACH, FL 32114	■ Remove
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			Add
			□ Remove
			☐ Change
			☐ Remove
			□ Change
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			Change
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reflective date is listed te: If the date insert	l, the date must be spe	cific and cannot be i	prior to date of filing o	r more than 90 days at	fler filing \ Pursi	ant to 605.02
rument's effective d	ate on the Departm	ent of State's reco	ords.	mig requirements, t	inis date wiii n	or be fisted (
record specifies	a delayed effec	ctive date, but	not an effective	e time, at 12:01	l a.m. on th	ne earlier
he 90th day afte	er the record is	filed.				
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Filing Fee: \$25.00