

18000015647

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

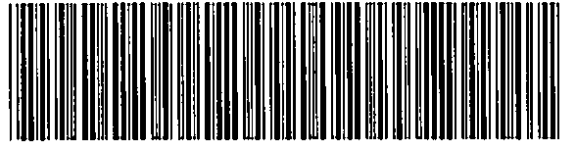
(Business Entity Name)

(Document Number)

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06/13/18--01011--021 **25.00

2018 JUN 13 13 48 31
FALLS CHURCH, VIRGINIA

JUN 15 2018
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARK AVENUE, 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:

Arlean Thompson

Name of Person

ARK AVENUE, LLC

Firm/Company

14925 Arbor Springs Circle

Address

Tampa, FL 33624

City/State and Zip Code

arkavenue@gmail.com

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

For further information concerning this matter, please call:

ARLEAN THOMPSON

at

813, 328-9544

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

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

ARK AVENUE, 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 1/17/18 and assigned
Florida document number L18000015647

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

14925 Arbor Springs Circle

Tampa, FL

33624

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

14925 Arbor Springs Circle

Tampa, FL

33624

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:

Arlean Thompson

New Registered Office Address:

14925 Arbor Springs Circle

Enter Florida street address

Tampa

City

Florida

33624

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

FILED
JAN 18 AM 8:51
CLERK OF CIRCUIT COURT
JAN 18 AM 8:51

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

Title	Name	Address	Type of Action
AMBR	Arlean Thompson	14925 Arbor Springs Circle	<input type="checkbox"/> Add
		Tampa, FL 33624	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Arlean Thompson	14925 Arbor Springs Circle	<input type="checkbox"/> Add
		Tampa, FL 33624	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

2018 JUN 13 AM 8:01
FILE

[illegible]

(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)

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.

Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Arlean Thompson

Typed or printed name of signee

FILED
2016 JUN 13 AM 8:01
FBI - ALBUQUERQUE