118000012911

(Requestor's Name)
(Äddress)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Mailort

Office Use Only



600316604876

08/02/18--01002--008 **30.00

18 AUG-1 PH 3: 43

FILED

18 AUG 13 PH 4:50

SEGRETARY OF STATE

7012



August 2, 2018

MARK W NONNI 326 WILLIAMS ST TALLAHASSEE, FL 32303

SUBJECT: 512 NORTH CALHOUN STREET, LLC

Ref. Number: L18000072911

We have received your document for 512 NORTH CALHOUN STREET, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

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

Octavia L Simmons Regulatory Specialist III

Letter Number: 818A00015876

COVER LETTER

	egistration Sec pivision of Corp			
er preza		I CALHOUN STREET, LLC		
SUBJECT	: . <u></u>	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub- ndence concerning this matter		
		Mark W. Nonni		
			Name of Person	
		Barrett, Nonni & Homola,	PLLC	Daytime Telephone Number S60.00 Filing Fee. Certificate of Status &
			Firm/Company	
		326 Williams Street		
			Address	
		Tallahassee, FL 32303		
			City/State and Zip Code	
		bnhpllc@gmail.com E-mail address: (to be used for future annual report notifi	cation)
For further	r information co	oncerning this matter, please ca		
Mark W.	Nonni		678 575-3618	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed i	s a check for th	e following amount:		
\$25.00) Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

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

512 North Calhoun Street, LLC			
(Name of the Lim	ted Liability Compa (A Florida Limited	iny as it now appears o Liability Company)	n our records.)
The Articles of Organization for this Limited I	iability Company	were filed on 03/21	/2018 and assigned
Florida document number L18000072911	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here	;
Barrett, Nonni & Homola, PLLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	=
Enter new principal offices address, if appli	cable:	326 Williams Stree	et. Tallahassee, Ft 32303
(Principal office address MUST BE A STREET ADDRESS)			- 1 8 元 - 8 元 - 8 元
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	(<u>BOX)</u>	326 Williams Stree	et, Tallahassee, FL 32303 - 5
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	/or registered of	ffice address on o e:	ur records, enter the name of the
	226 111111 0		
New Registered Office Address:	326 Williams S		street address
	Tallahassee		22202
	1 arranassee	City	, Florida ³²³⁰³ Zip Code
		Cuy	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>	Address	Type of Action
AMBR	Mark W Nonni	326 Williams Street	
		Tallahassee, FL 32303	Remove
			Change
AMBR	Christopher M Ferraro	1534 Golf Terrace Drive	Add
		Tallahassee, FL 32301	■ Remove
			Change
AMBR	R. Vinson Barrett	326 Williams Street	⊜ Add
		Tallahassee, FL 32303	Remove
			Change
AMBR	Jaeson W Homola	326 Williams Street	Add
		Taliahassee, FL 32303	Remove
			Change
			TLLANASSEE TO THE SEE
			SSEEL LORDA
			☐ Add
			□ Remove
			□ Chanve

70	ervices-law Fi	
·		
 		
	•	
		
		新 五
		
		im a PP
		QI -
		16 V CIL
		7 0
Note: If the date inserted in this	nust be specific and cannot be prior to date of block does not meet the applicable sta	(optional) of filing or more than 90 days after filing.) Pursuant to 605.0207 atutory filing requirements, this date will not be listed as
locument's effective date on the	Department of State's records.	
e record specifies a delay The 90th day after the re		effective time, at 12:01 a.m. on the earlier of
August I Dated	2018	
<u> </u>	111.010	
	MUA (
	Signature of a member of authorized re	and the state of the second beautiful and the
	Signature of a member of addiorized to	epresentative of a member
Mark W. Nonni	Signature of a memoer of audiorized to	epresentative of a member

Page 3 of 3

Filing Fee: \$25.00