

L18000096761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

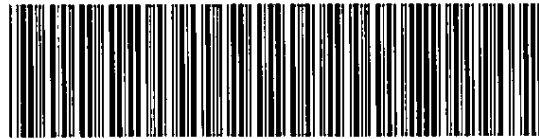
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2018 OCT 17 PM 3:54
TALLAHASSEE, FLORIDA

2018 OCT 17 AM 10:55

D BRUCE
OCT 29 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: W & W Stucco
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:

John Willis
Name of Person

W & W Stucco
Firm/Company

1765 Marshcote Walk
Address

Fleming Island FL 32003
City/State and Zip Code

jgoindarp@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Willis at (904) 703-0902
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
2018 OCT 17 PM 3:54
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

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

W & W STUCCO
(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 Apr 17, 2018 and assigned Florida document number L18000096761.

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)

FILED
2018 OCT 17 PM 3:04
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

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:

Nick Watts

New Registered Office Address:

3832 Falcon Crest

Enter Florida street address

Green Cove Springs

City

Florida

32043

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.

Nick Watts

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>
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MGR	John Willis	1765 Margaret St Walk Fleming Island FL 32003	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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MGR	Mike Watts	3832 Finken Crest Glen Cove Springs FL, 32043	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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FILED
OCT 17 2008
PM 3:38
FLEMING ISLAND
FL 32003

2018 OCT 11 / PM 3:54
ST. JOHN'S COLLEGE
ITALY ASSOCIATION

2018 OCT 17 PM 3:54
ST. LOUIS
FAL. CHASCO FARMER

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(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)

Dated October 15, 2018

Ch F Wier
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

John F. Wells

Typed or printed name of signee