

L18000110521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

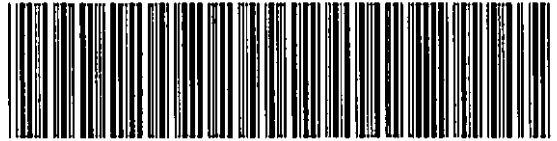
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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FILED
18 JUN -7 PM 3:40
SOUTHERN STATE
COURT REPORTERS

✓ SALY

JUN 7 2018

2592 N Highway 81
Ponce de Leon, FL 32455
June 7, 2018

RE: Restaurant Closing and Release of Name
The Cove II, LLC
Highway 1578
Ponce de Leon, FL 32455

To Whom It May Concerns:

As of March 31, 2018, I volutarily closed The Cove II, LLC, in Ponce de Leon, FL, due to personal health issues. Zach Williams is reopening the restaurant under the same name, with my permission.

Please contact me if you need additional information. My email address is:
vernabarley@yahoo.com
My cell phone number is 850-333-1569. If I do not answer, PLEASE leave a message!

Sincerely,


Verna M. Barley
Former manager/owner

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: The Cove LL 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:

Zack Williams

Name of Person

The Cove II LLC

Firm/Company

1578 Highway 90

Address

Ponce De Leon, FL 32455

City/State and Zip Code

zackwilliamsa900@gmail.com

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

For further information concerning this matter, please call:

Zack Williams

850

209-9947

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

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

FILED
18 JUN -7 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Cove LL 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 May 2, 2018 and assigned
Florida document number L18000110521.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The Cove II LLC

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:

1578 Highway 90 Ponce De Leon, FL 32455

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

1578 Highway 90 Ponce De Leon, FL 32455

(Mailing address MAY BE A POST OFFICE BOX)

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:

Zack Williams

New Registered Office Address:

1578 Highway 90

Enter Florida street address

Ponce De Leon

City

Florida 32455

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>	<u>Address</u>	<u>Type of Action</u>
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JUN 17 PM 3:10
STATE OF
MISSISSIPPI

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

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JUN -7 PM 3:40
18

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 May 12, 2018

zaal vier

Signature of a member or authorized representative of a member

Zack Williams

Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 21, 2018

THE COVE LL LLC
ZACK WILLIAMS
1578 HWY 90
PONCE DE LEON, FL 32455

SUBJECT: THE COVE LL LLC
Ref. Number: L18000110521

We have received your document for THE COVE LL LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Karen A Saly
Regulatory Specialist II

Letter Number: 518A00010578

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RECEIVED

2018 JUN -1 AM 11:30

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314