L18000126565

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A. BUTLER MAR 1 - 2022

COVER LETTER

TO: Registration S Division of Co			
JRD Fami	ly Holding, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The englaced Articles of	f Amendment and fee(s) are sub	amittad for Clina	
	ondence concerning this matter	-	
	Emma Dowd		
		Name of Person	
	Dowd Family Holding, Ll	<u>C</u>	
		Firm/Company	
	6823 Westend Ave.		
		Address	
	New Port Richey, FL 3-46;	5.5	
		City/State and Zip Code	
	gladdysgoodies@gmail.cor		
	E-mail address: (to be used for future annual report not	itication) —
For further information	concerning this matter, please c	rall:	
Emma Dowd		813 614-5872	
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 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)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ection
Division of C	Corporations	Division of Co	· ·
P.O. Box 63. Tallahassee.		The Centre of 1 2415 N. Monro	ramanassee se Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

JRD Family Holding, LLC	7022 FEB 22 PM 4: 09		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.)		
(A Fibrida Linnes	SECRETARY UP STATE		
he Articles of Organization for this Limited Liability Company	were filed on 5/14/2018 TALLAHASSEE, FL. and assigned		
	and assigned		
lorida document number L18000120565			
his amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited liab	oility company here:		
Dowd Family Holding, LLC			
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C" or the abbreviation "L.L.C."		
Inter new principal offices address, if applicable:	6823 Westend Ave.		
Principal office address MUST BE A STREET ADDRESS)	New Port Richey, FL 34655		
nter new mailing address, if applicable:	6823 Westend Ave.		
•	New Port Richey, FL 3-4655		
Mailing address MAY BE A POST OFFICE BOX)			
. If amending the registered agent and/or registered office:	addings on our manufacture the name of the new register		
s. It amending the registered agent and/or registered office i gent and/or th <u>e new regis</u> tered office address here:	address on our records, enter the name of the new registe		
the many time we required white was to the many time we have the m			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	19		

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 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
-			□Add
			□Remove
			⊡Change
			□Add
			□Remove
			□Change
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		02/01/2022			
ective date, if other th	an the date of fili	ng:	s date of filing or more t	(optional) ian 90 days after filing.) Pursi	rant to 605 020
e: If the date inserted in	this block does not	meet the applica		puirements, this date will n	
ument's effective date o	n the Department of	State's records.			
card enocities a delayed	offective date: but no	ot an effective tin	ne ar 12:01 a.m. on tl	ie earlier of: (b) The 90th	day after the
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Typed or printed name of signee