

L18000 133 997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

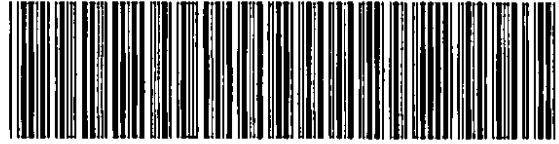
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer: On May 16, 2022, I speak with Craig about his name change amendment. He is changing the name to Cater Key LLC. AB.

Office Use Only



800384921228

04/04/22--01023--022 **80.00

FILED

2022 MAY 16 PM 6:38

SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER

MAY 18 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ANOTHER CHANCE WOODWORKING 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:

CRAIG ROSSI

Name of Person

ANOTHER CHANCE WOODWORKING LLC

Firm/Company

547 PALM DRIVE

Address

KEY LARGO, FLORIDA 33057

City/State and Zip Code

CATERKEYZ @ GMAIL O COM

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

For further information concerning this matter, please call:

CRAIG ROSSI

Name of Person

at

305

Area Code

587 - 1015

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

ANOTHER CHANCE WOODWORKING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2022 MAY 16 PM 6:38

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
Florida document number _____.

This amendment is submitted to amend the following:

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

CATER KEY 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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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:

New Registered Office Address:

Enter Florida street address

City

Florida

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

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

TO WHOM IT MAY CONCERN: I AM
CHANGING MY BUSINESS FROM MANUFACTURING
AND REPAIR TO CATERING OUT OF THE
SAME LOCATION STATED ON THE
COVER PAGE. IF I NEED TO
FILE ADDITIONAL PAPERWORK, PLEASE
ADVISE. THANK YOU FOR YOUR TIME.

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 3/25/2022



Signature of a member or authorized representative of a member

CRAIG ROSS

Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 18, 2022

CRAIG ROSSI
547 PALM DRIVE
KEY LAGRO, FL 33037

SUBJECT: ANOTHER CHANCE WOODWORKING LLC
Ref. Number: L18000133997

We have received your document for ANOTHER CHANCE WOODWORKING LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU NEED TO PUT THE CORRECT AMENDING NAME ON YOUR APPLICATION.

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) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 522A00008984