

418000201367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

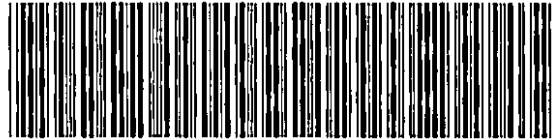
(Business Entity Name)

(Document Number)

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2019 FEB 25 PM 3:12


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03/24/19

Stephen Swett
5110 N Rome Ave. Tampa, FL 33603
813-750-7005
szs109@gmail.com

Included are the filing documents for amending our Amethyst Weddings LLC.
We simply filed incorrectly the first time and did not add any authorized persons. This filing is to correct that.

Thanks and please let me know if there are any complications,
- Stephen



COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Amethyst Weddings 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:

Stephen Swett

Name of Person

Amethyst Weddings LLC

Firm/Company

2719 N Riverside Dr

Address

Tampa FL 33602

City/State and Zip Code

szs109@gmail.com

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

For further information concerning this matter, please call:

Stephen Swett

Name of Person

at (813)

Area Code

750-7005

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

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SECRETARY OF STATE
TALLAHASSEE, FL 09104

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

Amethyst Weddings 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 08/22/18 and assigned
Florida document number L18000201367.

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)

3030 N. Rocky Point Dr.

STE 150A

Tampa FL 33607

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3030 N. Rocky Point Dr.

STE 150A

Tampa FL 33607

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:

Northwest Registered Agent LLC

New Registered Office Address:

7901 4th St N STE 300

Enter Florida street address

St. Petersburg

Florida 33702

City

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 add or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Stephen Swett	5110 N Rome Ave. Tampa, FL 33603	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Julia Chew	5110 N Rome Ave. Tampa, FL 33603	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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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.

Dated February 21st, 2019

Stephen Swett

Filing Fee: \$25.00