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SUBJECT:	CLIFTON AND DYESS, LLC				
SUBJECT.		Name of Lim	ited Liability Company		
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retur	n all correspo	ndence concerning this matter	to the following:	l	
		KATHI CLIFTON			
			Name of Person		
		CLIFTON AND DYESS,	LLC	1	
			Firm/Company		
		1066 RIDGE ROAD			
			Address		
		VALDOSTA, GA 31605		!	
		kelifton@bellsouth.net	City/State and Zip Code	-	
		-	to be used for future annual report notifi	(cation)	
For further	information c	oncerning this matter, please ca	•		
Kathi Clifte	on		229 251-4393		
	Name o	f Person	at () Area Code Daytime	Telephone Number	
Enclosed is	a check for th	ne following amount:			
□ \$2 5.00	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Registr Divisio P.O. Be	ING ADDRESS: ration Section on of Corporations ox 6327 rssee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	nutions	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLIFTON AND DYESS, LLC		1
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) .iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L18000218507	were filed on SEPTEMBER 13, 20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1066 RIDGE ROAD	
(Principal office address MUST BE A STREET ADDRESS)	VALDOSTA, GA 31605	
Enter new mailing address, if applicable:	1066 RIDGE ROAD	1
(Mailing address MAY BE A POST OFFICE BOX)	VALDOSTA, GA 31605	1 ,2,
Training address Marie Marie Work Williams		
B. If amending the registered agent and/or registered of		enter the name of the new
registered agent and/or the new registered office address her	<u>e</u> :	1 4 C
Name of New Registered Agent:		AM O
•		
New Registered Office Address:	Enter Florida street address	
	. Flori	da
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and sorovided for in Chapter 605, F.S.	Iam familiar with and S. Or, if this document is
		•

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>	Type of Action
MGR	KATHI CLIFTON	1066 RIDGE ROAD	 Add
		VALDOSTA, GA 31605	A dd
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fective date, if other than the date of filing: (op n effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days aff	t ional) der filing.) Pursuant to 605.020
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, the cument's effective date on the Department of State's records.	his date will not be listed as
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record specifies a delayed effective date, but not an effective time, at 12:01 The 90th day after the record is filed.	a.m. on the earlier o
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ned November 1 . 201/0.	
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Signature of a member or authorized representative of a member	
	1

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Filing Fee: \$25.00