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SECRETARY OF STATE  
TALLAHASSEE, FL

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10/04/18--01022--023 \*\*25.00

OCT 19 2018

S. PRATHER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CLAMPETT & DRYSDALE, 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:

Charles H. Johnson

\_\_\_\_\_  
Name of Person

Richman Greer, P.A.

\_\_\_\_\_  
Firm/Company

396 Alhambra Circle, North Tower 14th Floor

\_\_\_\_\_  
Address

Miami, FL 33134

\_\_\_\_\_  
City/State and Zip Code

cjohnson@richmangreer.com

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

For further information concerning this matter, please call:

Charles H. Johnson

305 373-4000  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED  
2018 OCT -4 PM 6:04  
SECRETARY OF STATE  
TALLAHASSEE, FL  
and assigned

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

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Miami, FL 33134

Miami, FL 33134

## Zip Code

## Page 1 of 3

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>
MGR	Oakley Jason Smith	11924 Forest Hill Blvd.	<input type="checkbox"/> Add
		Suite 10S-342	<input checked="" type="checkbox"/> Remove
		Wellington, FL 33414	<input type="checkbox"/> Change
MGR	Charles H. Johnson, Trustee of the CD Revocable Trust dtd 9/28/18	396 Alhambra Circle	<input checked="" type="checkbox"/> Add
		N Tower, 14th Floor	<input type="checkbox"/> Remove
		Miami, FL 33134	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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(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)

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.

October 1, 2018

~~Signature of a member or authorized representative of a member~~

Charles H. Johnson

Typed or printed name of signee

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SECRETARY OF STATE  
TALLAHASSEE, FL

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