# 118000235905

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Otty/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Boomess Entry Plante)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300320643023

11/13/18--01008--018 \*\*25.00

FILED

18 NOV 13 At 9: 30

18 NOV 13 At 9: 30

NOV 2 8 2018 S. YOUNG

### **COVER LETTER**

FO: Registration Se Division of Cor			
SUBJECT: Je	PAREN GI Name of Limi	if Child LLC ited Liability Company	• 
	Ĺ	18002359	105
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jeff Jeff	Name of Person  Ey Griffth  Firm/Company	1 LLC
	1450	MAILE S	<u>st.</u> = = =
	North Jagle E-mail address: (	City/State and Zip Code  e v der C 4  to be used for future annual report notif	34288
For further information	concerning this matter, please ca	all:	30 NDA
Jeft	2 Briffith	31(941) 81	5 5128
Name	of Person	Area Code Daytime	e 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:

TO:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JEFFREY GRIFFITH LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records Liability Company)	<u>i.)</u>
The Articles of Organization for this Limited Liability Company Clorida document number 1.18000235905	y were filed on 10/04/18	and assigned
this amendment is submitted to amend the following:		
x. If amending name, enter the new name of the limited liab	bility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC"	or the abbreviation "L.1C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		See 1 10110 A
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here.  Name of New Registered Agent:		, enter the name of the
New Registered Office Address:	Enter Florida street address	
	. Flo	orida
· · · · · · · · · · · · · · · · · · ·	Cay	oridaZıp 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 added or removed from our records:

MGR =	Manager	•
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jeffrey Griffith	1450 Maile Street, North Port, FL 34288	<b>B</b> Add
			Remove
			Change
			Remove
			☐ Change
			Remove
			Grange Change
			→ □ Add
			Remove
			Change
			Remove
			☐ Change
			Add
			☐ Remove
			☐ Change

· · · · · · · · · · · · · · · · · · ·	<del></del>			-
				-
		· · · · · · · · · · · · · · · · · · ·		<del></del>
				-
				_
				_
			<u>.                                    </u>	_
				_
			<u> </u>	_
			IGV I	
				ַ ֖֖֖֖֖֖֡
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	- LORDA	<b>-</b> `_
				_
				-
<del></del>				_
			<u>-</u>	<del></del>
			, , , , , , , , , , , , , , , , , , ,	
ffective date, if other than the an effective date is listed, the date must	st be specific and cannot be prior to	date of filing or more than 90 c	_ (optional) lays after filing.) Pursuant to 60	05.020
fote: If the date inserted in this blocument's effective date on the D		ne statutory titing requireme	rais, this date will not be its	sicu a
e record specifies a delayed The 90th day after the rec	d effective date, but not ord is filed.	an effective time, at 1	2:01 a.m. on the ear	lier (
November 7	2018	. —		
	11/1/1/	16		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00