

L18000 268 717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

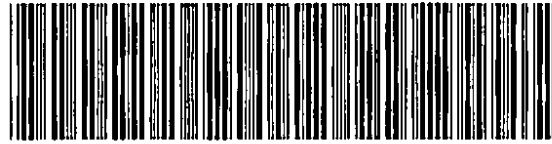
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000337524370

12/02/19--01007--026 **25.00

2019 DEC 2 2:58 PM

R. WHITE
JAN 09 2020

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: Deese Repairs LLC
Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William T. Deese Jr.
Name of Person

Firm/Company

PO Box 235
Address

Cottendale, FL 32431
City/State and Zip Code

deeserepairsllc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William T. Deese Jr. at (850) 272-0018
Name of Person Area Code Daytime Telephone Number

Payment used 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**

Deese Repairs LLC

2019 DEC -2 PM 2:58

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

Articles of Organization for this Limited Liability Company were filed on 11/16/2018 and assigned
document number U18000268717

Amendment is submitted to amend the following:

Amending name, enter the new name of the limited liability company here:

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

For new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS

For new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

PO Box 235

Cottondale, FL 32431

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

, Florida

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

= Manager
R = Authorized Member

R = Authorized Member

Type of Action

2R Jason Hancock 11640 Sweetwater ☐ Add
Branch Rd.
Fountain, FL 32438 ☒ Remove

☐ Change

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

Effective date, if other than the date of filing: 11/26/2019 (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:
 the 90th day after the record is filed.

Noted _____

William T. Deese Jr.
 Signature of a member or authorized representative of a member

William T. Deese Jr.
 Typed or printed name of signee