

L18000273386

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

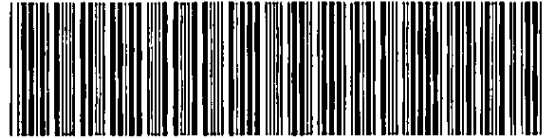
(Document Number)

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05/24/21--01013--022 \*\*35.00

21 JUL -8 AM 10:04



RECEIVED

2021 JUL -8 AM 2:01  
FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 24, 2021

BONNIE MORGAN  
5569 118TH STREET  
JACKSONVILLE, FL 32244

SUBJECT: POWELL CONSTRUCTION & DEVELOPMENT LLC  
Ref. Number: L18000273386

We have received your document for POWELL CONSTRUCTION & DEVELOPMENT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews  
OPS

Letter Number: 921A00014461

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: POWELL CONSTRUCTION & DEVELOPMENT 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:

BONNIE MORGAN

Name of Person

Firm/Company

5569 118TH STREET

Address

JACKSONVILLE, FL 32244

City/State and Zip Code

morgan8113@bellsouth.net

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

For further information concerning this matter, please call:

BONNIE MORGAN

904 318-8828  
at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

*Paid 6/22/21 CK# 5630 \$35.00*

- |  |  |  |  |
|--|--|--|--|
| <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 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**

21 JUL -8 AM 10: 04

POWELL CONSTRUCTION & DEVELOPMENT 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 11/27/2018 and assigned  
Florida document number L18000273386.

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) \_\_\_\_\_

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address MAY BE A POST OFFICE BOX) \_\_\_\_\_

104 E. MACCLENLY AVE.

MACCLENLY, FL 32063

**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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

City

Florida

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 added or removed from our records:**

**MGR = Manager**

**AMBR = Authorized Member**

21 JUL -8 AH IG: 04

[illegible]

21 JUL -8 AM 10: 04

(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.

2021

*Rya C Powell*  
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

RYAN C. POWELL

Typed or printed name of signee

**Filing Fee: \$25.00**