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## **COVER LETTER**

TO:	Registration Sec Division of Corp			
SUBJE	THENATIO	N.COM, LLC.	•	•
SUBJE	CI;	Name of Lim	ited Liability Company	
The enc	losed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspor	ndence concerning this matter	to the following:	
		DAVID DENNISON JONES	5	
		THENATION.COM, LLC.	Name of Person	· · ·
		1730 BALD EAGLE DRIVE	Firm/Company E UNIT C	
		dsu80@yahoo.com	City/State and Zip Code	<u></u>
		E-mail address: (	to be used for future annual report notific	cation)
For furt	her information ec	oncerning this matter, please co	all:	
DAVIĐ	DENNISON JO	NES	941 855-0680	
	Name of	Person		Telephone Number
Enclose	d is a check for th	e following amount:		
<b>ઇ</b> \$25	.00 Filing Fee	☑ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra	NG ADDRESS: ation Section to of Corporations	STREET/COURIE Registration Section Division of Corporat	

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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(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 121018 and assigned Florida document number \_\_\_\_L18000282722 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) 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: DAVID DENNISON JONES Name of New Registered Agent: 1730 BALD EAGLE DRIVE UNIT C New Registered Office Address:

## 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.

NAPLES

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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>	Name	<u>Address</u>	Type of Action
MGR	DAVID DENNISON JONES	1730 BALD EAGLE DRIVE	
			Add
		UNIT C	
			Remove
		NAPLES, FLORIDA, 34105	
			Change
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	121518
(If an effo <u>Note:</u>	ive date, if other than the date of filing:
(b) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated _	1/14/2019

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00