1190000 23911

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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APPROVEU AND FILED

10.



March 7, 2019

JOSEPH E SEAGLE 924 WEST COLONIAL DRIVE ORLANDO, FL 32804

SUBJECT: MCKALT HOLDINGS LLC

Ref. Number: L19000023911

We have received your document for MCKALT HOLDINGS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

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) 245-6052.

Letter Number: 219A00004699

Tacarri K Glass Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of Co.	rporations				
MCKALT SUBJECT:	HOLDINGS LLC				
NODSECT.					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	Joseph E Seagle				
		Name of Person		-	
	Joseph E Scagle PA				
		Firm Company		-	
	924 West Colonial Drive			2019 HAR 21 SECRE 135 FAIT MINSS	
		Address		GREE HA	APP F
	Orlando, FL 32804			21 1888	ESTATE OF THE PARTY OF THE PART
		City/State and Zip Code		PM 3: 23) (
	joe@seaglelaw.com		-	$\frac{1}{2}$	
	E-mail address: (to be used for future annual report notif	scation)	िन्द्र थ	
For further information of	concerning this matter, please c	all:			
Joseph E Seagle		407 373-7451 at ()			
Name (of Person	Area Code Daytime	: Telephone Number	r	
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

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

MCKALT HOLDINGS LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records ited Liability Company)	<u>.</u> !
The Articles of Organization for this Limited Liability Comp Florida document number $\frac{1.19000023911}{1.19000023911}$.	pany were filed on <u>01/22/2019</u>	and assigned
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:		DOIS MAR
(Principal office address MUST BE A STREET ADDRES.	<u> </u>	TO TOP
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	301 Mission Drive	PH 3: 23
Stating waters beat by A 1 031 Of Fixe boxy	New Smyrna Beach, FL 32170	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:	here: Enter Florida street address	
	, Flo	
	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

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	Address	Type of Action
MGR	Colleen K.T. Musselman	2241 Swoope Dr	
		New Smyrna Beach, FL 32168	
			Remove
		Middle initials: "K.T."; not "K" Zip 32168; not 32804	■ Change
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ocument's effec	ctive date on th	ie Department	of State's reco	ds.				
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February	24)	15	2019	1				
Dated	20	25	·	-p/				
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00