1190000 23915

| (Re | questor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | ldress) | |
| (Ac | ldress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | MAIT | MAIL |
| (Bu | isiness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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02/11/19--01026--008 **25.00

R. WHITE

FEB 1 8 2019

P# 4: 10

COVER LETTER

| Division of Co | rporations | | |
|-----------------------------|--|---|---|
| SUBJECT: A4 | Stop Bail | Bonds LLC | |
| | Name of Lin | nited Liability Company | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | _ | | |
| | mary T. | Williams Name of Person | |
| | | | |
| | A1 Stop B | ail Bonds LLC | |
| | | Firm/Company | |
| | 58 E. Ma | in St Unit 6 | |
| | | Address | |
| | Apopka, F | 1 32703 City/State and Zip Code Bonds @gmanh. a | |
| | A1 STADBOLL | City/State and Zip Code | |
| | | | |
| | | (to be used for future annual report notif | ication) |
| For further information c | oncerning this matter, please o | all: | |
| Mary T. W | illiams | 470 · | 2330 |
| / Name o | f Person | Area Code Daytimo | c Telephone Number |
| | | | |
| Enclosed is a check for the | ne 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

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

FILED

| | , Florida |
|--|---|
| | |
| | Enter Florida street address |
| New Registered Office Address: | |
| Name of New Registered Agent: | |
| 3. If amending the registered agent and/or regist registered agent and/or the new registered office addr | tered office address on our records, <u>enter the name of the new</u> ress here: |
| Mailing address MAY BE A POST OFFICE BOX) | |
| Enter new mailing address, if applicable: | |
| Principal office address MUST BE A STREET ADDR | ESS) |
| Enter new principal offices address, if applicable: | |
| he new name must be distinguishable and contain the words "Limi | ited Liability Company," the designation "LLC" or the abbreviation "L.L.C." |
| A. If amending name, enter the new name of the limit | ted liability company here: |
| This amendment is submitted to amend the following: | |
| The Articles of Organization for this Limited Liability Co. Florida document number L1900023915 | ompany were filed on |
| (A Florida | v Company as it now appears on our records.) Limited Liability Company) |
| A1 Stop Bail Bond | |
| 111/111111111111111111111111111111111 | c 11C |

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 ompany 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 25712/entrd | Type of Action |
|--------------|------------------|--|----------------|
| <u>ngr</u> | mary 1. Williams | Address 2576 Lented Apopka, FL 32712 | № Add |
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| ffective date, if other than the date of filing: 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 605.026 tots: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ocument's effective date on the Department of State's records. Be 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. Add Signature of a member or authorized representative of a member. | | |
|--|---|-------|
| 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 605.020 lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a occument's effective date on the Department of State's records. 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. | | |
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| Signature of a member or authorized representative of a member | 2019 | |
| | Signature of a member or authorized representative of a member | |
| Mary T. Williams | | |

Page 3 of 3

Filing Fee: \$25.00