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## **COVER LETTER**

TO:			•	
CUD IE		rdson LLC		
SUBJEC	-1:	Name of Lim	ited Liability Company	
Division of Corporations  Blair Richardson 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:  Sean Delaune  Name of Person  Sean Delaune LLC  Firm/Company  7747 Tommasi Ct  Address  Naples, FL, 34114  City/State and Zip Code sd@floridasbestseafood.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Sean Delaune  \$\frac{504}{\text{Area Code}} \frac{7621701}{\text{Daytime Telephone Number}}  Enclosed is a check for the following amount:  \$\Begin{array}{c} S55.00 Filing Fee & Gertificate of Status & Certified Copy (cadditional copy is enclosed) Certified Cofys  Certificate of Status & Certified Copy (cadditional copy is enclosed) Certified Copy  Certificate Of Status & Certificate Of Status & Certified Copy  Certificate Of Status & Certified Copy  Certificate Of Status & C				
Please re	Division of Corporations    Blair Richardson LLC			
		Sean Delaune		
		<del></del>	Name of Person	· · · · · · · · · · · · · · · · · · ·
Blair Richardson 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:    Sean Delaune				
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		7747 Tommasi Ct		Daytime Telephone Number    S60.00 Filing Fee.     Certificate of Status & Certified Copy     (udditional copy is enclosed)    Cess:     ion Section     of Corporations     record   record     record   reco
Address				
		Naples, FL, 34114		
Sean Delaune  Name of Person  Sean Delaune LLC  Firm/Company  7747 Tommasi Ct  Address  Naples, FL, 34114  City/State and Zip Code sd@floridasbestseafood.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Sean Delaune  1 504 7621701  Name of Person  Name of Person  Daytime Telephone Number  Enclosed is a check for the following amount:				
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For furth	er information c		-	tification)
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	Name o	r reison	Area Code Dayn	me Telephone Number
Enclosed	d is a check for th	ne following amount:		
<b>■ \$2</b> 5.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Registration S Division of C P.O. Box 632	Section Torporations 17	Registration S Division of Co The Centre of	orporations Tallahassee

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blair Richardson LLC			
(Name of the Limite	ed Liability Compa A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Lie Florida document number L19000030970	ability Company	were filed on 1/30/2019	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liah	oility company here:	
SEAN DELAUNE LLC			
The new name must be distinguishable and contain the we	ords "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		7747 Tommassi Ct	
Principal office address MUST BE A STREE	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)  Organization for this Limited Liability Company were filed on L19000030970  In it is submitted to amend the following:  In g name, enter the new name of the limited liability company here:  NE LLC  Is to distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  7747 Tommassi Ct  Naples, FL 34114  Illing address, if applicable:  7747 Tommassi Ct  Naples, FL 34114  Illing address, if applicable:  7747 Tommassi Ct  Naples, FL 34114  Illing address, if applicable:  SEMAY BE A POST OFFICE BOX)  In this submitted Liability Company were filed on Liability Company here:  Naples, FL 34114  Illing address, if applicable:  SEMAY BE A POST OFFICE BOX)  In this submitted Liability Company were filed on Liability Company here:  Naples, FL 34114  Illing address, if applicable:  SEMAY BE A POST OFFICE BOX)  Sean Delaune  THE RESEARCH ASSINGLE ASSINGL		
Enter new mailing address, if applicable:		7747 Tommasi Ct	
Mailing address MAY BE A POST OFFICE I	BOX)	Naples, FL 34114	
			"or the abbreviation "L.L.C."  the name of the new registered
B. If amending the registered agent and/or reagent and/or the new registered office addres		address on our records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:	Sean Delaune		
New Registered Office Address:	7747 Tommasi	<u> </u>	
		Enter Florida street address	
	Naples	, Florida	34114

## 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.

City

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>	<u>Name</u>	Address	Type of Action
MGR	SEAN DELAUNE	7747 Tommasi Ct, Naples, FL, 34114	<b>=</b> Add
			🗆 Remove
			□Change
MGR	BLAIR RICHARDSON	2674 Tanglewood Trl, Palm Harbor, FL 34685	□Add
			■Remove
			□Change
		<del></del>	□Add
			□Remove
			□Change
			□Add
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Note:	tive date, if other than the date of filing:
ne reco ord is f	ord 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 filed.
	7/13
Dated	Mare Roberts
Dated	Signature of a member or authorized representative of a member

Filing Fee: \$25.00