

L19000040069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

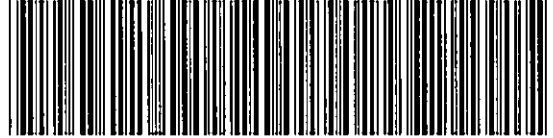
(Document Number)

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04/03/20--01011--003 **30.00

OFFICE OF THE
CLERK OF THE
COURT
1114 HASSELL ST
ST. LOUIS, MO 63101

2020 APR -3 AM 7:09

FILED

APR 17 2020

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Old Phucker Renovation and Restoration 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:

Letitia McGowin

Name of Person

Old Phucker Renovation and Restoration

Firm/Company

3700 Atlantis Dr

Address

Panama City, FL 32409

City/State and Zip Code

oldphuckerpcfl@gmail.com

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

For further information concerning this matter, please call:

Terry Brady

850

771-5259

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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
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**

Old Phucker Renovation and Restoration 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 02/08/19
Florida document number 19000040069

FILED
2020 APR -3 AM 7:09
CLERK OF SUPERIOR COURT
JANUARY 13, 2020
TALLAHASSEE, FL

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)

3700 Atlantis Dr

Panama City, Fl. 32409

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:

Name of New Registered Agent:

Letitia McGowin

New Registered Office Address:

3700 Atlantis Dr

Enter Florida street address

Panama City

Florida 32409

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.

LMcGowin

Verified by PDFfiller
01/24/2020

If Changing Registered Agent, Signature of New Registered Agent

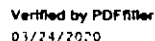
[illegible]

[illegible]

(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.

LMcGowin



Typed or printed name of signee

Filing Fee: \$25.00