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SECONDE CORPORATION

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## **COVER LETTER**

	Registration Sec Division of Corp					
SUBJEC'		adi Consulting & Associates	LLC			
SUBJEC	1 •	Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub	-			
Troube rec	arr arr correspon	Frederick Shehadi IV	to the following.			
		Fred Shehadi Consulting &	Name of Person Associates LLC			
		6050 Clay Cir	Firm/Company			
		Gulf Breeze, FI	Address			
		fnsservices850@gmail.com	City/State and Zip Code		<u>.</u> څ	
For furthe	r information co	E-mail address: ( oncerning this matter, please ca	to be used for future annual report notificall:		)	
Frederic	k Shehedi Iv		850 7482171		) PH	7.22 C
	Name of	f Person		elephone Number	10 PH12: 27	STATE
Enclosed	is a check for th	e following amount:				S
\$25.0	0 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/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

19 JULY 10 PAIR: 27 Fred Shehadi Consulting & Associates 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  $\frac{2/19/2019}{1}$ and assigned Florida document number \_\_\_\_\_L19000049213 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Fred Shehadi Consulting & Associates LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 6050 Clay Cir. Enter new principal offices address, if applicable: Gulf Breeze, FI 32563 (Principal office address MUST BE A STREET ADDRESS) 6050 Clay Cir. Enter new mailing address, if applicable: Gulf Breeze, FI 32563 (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: Frederick Shehadi IV Name of New Registered Agent: 6050 Clay Cir New Registered Office Address: Enter Florida street address Gulf Breeze

## 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 Chapting 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>	<u>Address</u>	Type of Action
MGR	Fred Shehadi	4631 Soundside Dr Gulf Breeze, Fl 32563	Add
			■ Remove
			☐ Change
MGR	Susan Shehadi	4631 Soundside Dr. Gulf Breeze, Fl 32563	□ Add
			■ Remove
MGR	Frederick Shehadi IV	6050 Clay Cir. Gulf Breeze, FL 32563	■ Add
		•	Remove
		<del>-</del>	
MGR	Sergio Williams	6050 Clay Cir. Gulf Breeze, Fl 32563	——————
			□ Remove
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he record specifies a do The 90th day after th		ot an effective time, at 12:01 a.m.	on the earlier of:
June 6th Dated	2019		
	8	—· <del>-/-</del>	
	- May		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00