

L19000085947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

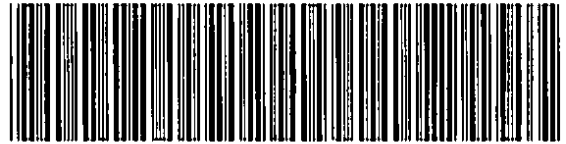
(Document Number)

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TALLAHASSEE, FLORIDA
OFFICE OF THE
CLERK OF THE
SUPREME COURT

O SIMMONS
MAY 08 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2019

EARLE BROWNE
9094 SW 39TH ST
MIRAMAR, FL 33025

SUBJECT: BROWNE SEBASCO & WILLIAMS LLC
Ref. Number: L19000085947

We have received your document for BROWNE SEBASCO & WILLIAMS LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 019A00007473

11:21 AM APR 13 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BROWNE SEBASCO & WILLIAMS 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:

EARLE E. BROWNE

Name of Person

BROWNE SEBASCO & WILLIAMS LLC

Firm/Company

9094 SW 39TH ST

Address

MIRAMAR/FLORIDA/33025

City/State and Zip Code

EARLEBROWNE@GMAIL.COM

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

For further information concerning this matter, please call:

EARLE E. BROWNE

305

302-7800

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/COURIER ADDRESS:

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BROWNE SEBASCO & WILLIAMS 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 03/28/2019 and assigned
Florida document number L19000085947.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

Florida

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	EARLE E. BROWNE	9094 SW39TH ST MIRAMAR, FLORIDA, 33025	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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FILED
MAY 19 10 00 PM
TALLAHASSEE, FLORIDA

N/A

FILED
MAY -6 PM 4:00
19
FBI - TAMPA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated 23RD APRIL. 2019

Signature of member or authorized representative of a member

PEDRO SEBASCO

Typed or printed name of signee