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JUL 1 9 2019

COVER LETTER

TO:				
GI I DI		opment Group, LLC		
SUBJ	ECI:	Name of Limi	ted Liability Company	
The e	nclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
		James R. Allen		
		Allen Development Group	Name of Person	
		707 S Gulfstream Ave #40	Name of Person Firm/Company e #408 Address City/State and Zip Code @gmail.com ress: (to be used for future annual report notification) ase call: at (
		Sarasota, FL 34236	Address	
		jim.allendevelopment@gma	Name of Limited Liability Company Int and fee(s) are submitted for filing. Incerning this matter to the following: R. Allen Name of Person Development Group Firm/Company Gulfstream Ave #408 Address ta, FL 34236 City/State and Zip Code Indevelopment@gmail.com E-mail address: (to be used for future annual report notification) this matter, please call: 239 31 (Area Code Daytime Telephone Number ag amount: 00 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: James R. Allen Name of Person Allen Development Group Firm/Company 707 S Gulfstream Ave #408 Address Sarasota, FL 34236 City/State and Zip Code jim.allendevelopment@gmail.com E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: R. Allen Name of Person Name of Person Area Code Daytime Telephone Number ed is a check for the following amount: 5.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)			
For fu	irther information c	oncerning this matter, please ca	all:	
Jame:	s R. Allen		at ()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclo	sed is a check for th	ne following amount:		
■ S:	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

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

Allen Development Group, LLC			
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our reco imited Liability Company)	ords.)	
The Articles of Organization for this Limited Liability Cor Florida document number L19000100624	mpany were filed on April 11, 2019	and as	ssigned
This amendment is submitted to amend the following:	•		
A. If amending name, enter the new name of the limite	ed liability company here:		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "L	LC" or the abbreviation "l	L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u></u>		
		<u> </u>	
		5.7 <u>Ju</u>	
Enter new mailing address, if applicable:		<u></u> _	
(Mailing address MAY BE A POST OFFICE BOX)		· -	· · · · · · · · · · · · · · · · · · ·
		··	
B. If amending the registered agent and/or registeregistered agent and/or the new registered office addre		cr: rds. <u>enter the name</u>	of the i
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street addi		
	Enter Florida street addi	ress	
	, \	Florida Zip Code	,
New Pagistored Agent's Signature, if changing Pagistored	·	гар Соме	

New Registered Agent's Signature, it 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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Dave Hall	707 S Gulfstream Ave #408 Sarasota, FL 34236	_ Add
			Remove
			□ Change
MGR	Jonathan Sierota	707 S Gulfstream Ave #408 Sarasota, FL 34236	🛱 Add
			Remove
			Change
MGR.	Cynthia Lang	707 S Gulfstream Ave #408 Sarasota, FL 34236	■ Add
			Remove
			Change
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Note: If the date inserted in the	e must be specific and cannot be prior	(optional) or to date of filing or more than 90 days after filing.) Pursuant cable statutory filing requirements, this date will not best.	to 605.0207 (3 be listed as th
the record specifies a dela b) The 90th day after the		ot an effective time, at $12:01$ a.m. on the ϵ	earlier of:
Dated July 8	2019		
Ja	Signature of a member or auth	norized representative of a member	
James R. Allen			
James K. Atten	Typed or print	ted name of signee	

Page 3 of 3

Filing Fee: \$25.00