L19000154214

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Eiling Officer	
Special instructions to	rilling Officer.	
		i
Mbrsign		

Office Use Only



500351200595

06/31/26--01028--005 **25.90

7.11 NOV 18 1112 07

O SIMMONS NOV 20 2020





November 5, 2020

SHEANA FLAHERTY 4031 CRYSTAL LAKE DR CHIPLEY, FL 32428 2ND ATTEMPT

SUBJECT: FLAHERTY'S CONSTRUCTION SERVICES LLC

Ref. Number: L19000154214

We have received your document for FLAHERTY'S CONSTRUCTION SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6050.

Letter Number: 520A00022175

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org



October 13, 2020

SHEANA FLAHERTY 2310 S HWY 77 STE 110-320 LYNN HAVEN, FL 32444

SUBJECT: FLAHERTY'S CONSTRUCTION SERVICES LLC

Ref. Number: L19000154214

We have received your document for FLAHERTY'S CONSTRUCTION SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6050.

Letter Number: 820A00020114

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

Division of Compactions D.O. DOV 0997 Mallaham El. 11, 9991

COVER LETTER

Division of Cor	porations		
SUBJECT:	-laherty's Cor	nstruction Service led Liability Company	es LLC.
The enclosed Articles of .	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	Shea	na Flahert	/
	Flaherty	S Construction Se	ervices LLC.
	2310 5.	Hwy 77 ste.	110-320
	Lynn Da	even, FL. 324 City/State and Zip Code	144
	ds roofing o	and con stregmail.	COM ·
For further information co	oncerning this matter, please ca		
Shearia F	-laherty Person	at (<u>830</u>) <u>928</u> - Area Code Daytime	-4970 : Telephone Number
Enclosed is a check for th	•		
¥ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

Flitale Coach ton Space 110

TIANELTYS CONSTRUCTION		
(Name of the Limited Liability Compar (A Florida Limited L	<u>iy as it now appears on our recor</u> iability Company)	<u>ds.</u> }
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L19000154214}{}$	were filed on May 8	2,2020 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi		1 12 12
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "L1 G	" or the abbreviation " C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2310 S. Hwy Lynn Haven,	y 77 ste. 110-320 F1. 32444
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2310 S. Hw Lynn Haven	y 77 ste. 110-320 , Fl. 32444
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	as a second
	ជ	lorida
	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. Thereby 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:

or removed	from our records:		
MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address 10 7.07.23	Type of Action
			□Add
			Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add

Page 2 of 3

	
	ىر: ن ن
fective date, if other than the date of filing: meffective date is fisted, the date must be specific and cannot be prior to date of filing or more the ote: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time The 90th day after the record is filed.	, at 12:01 a.m. on the earlier
Sheana Flahetty Typed or printed name of signee	
Signature of a member or authorized representative of a	

Page 3 of 3

Filing Fee: \$25.00