

W19000252421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2021 NOV -2 PM 2:55  
SECRETARY OF STATE  
TOLSON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

Stella Kathryn "Katie" Tucker LLC  
Name of Limited Liability Company  
*currently listed*

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stella K. Tucker  
Name of Person

\_\_\_\_\_  
Firm/Company

2930 Pine Branch Dr.  
Address

Melbourne, FL 32940  
City/State and Zip Code

Katiejonesreactor@outlook.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stella Jones at (850) 556-6033  
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

FILED

2021 NOV 12 PM 2:55  
STELLA ~~KATHRYN~~ KATHRYN "Katie" Tucker 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 10/7/2019 and assigned  
Florida document number L19000252421

This amendment is submitted to amend the following:

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

STELLA KATHRYN Jones LLC  
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)

2930 Pine Branch Dr  
Melbourne, FL  
32940

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2930 Pine Branch Dr  
Melbourne, FL  
32940

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:

(formerly Tucker)

Name of New Registered Agent:

Stella Kathryn Jones

New Registered Office Address:

2930 Pine Branch Dr  
Enter Florida street address

Melbourne Florida 32940  
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.

Stella Kathryn Jones  
If Changing Registered Agent, Signature of New Registered Agent

(Same agent  
just  
new last name)

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	Stella Kathryn Jones		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(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)  
**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.

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.

Dated October 12<sup>th</sup>, 2021.

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Stella K. Jones  
Typed or printed name of signee

(formerly  
Jucker)

(formerly  
Jucker)