

L19 000261057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

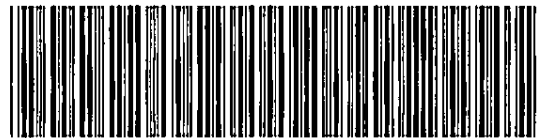
(Business Entity Name)

(Document Number)

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SECRETARY OF
TALLAHASSEE, FL

2023 JAN -3 PM 12:09

FILED

COVER LETTER

TO: Registration Section
Division of Corporations
Sliprock Creek AMZN LLC

RECEIVED

SUBJECT: _____
Name of Limited Liability Company

2022 JUL 26 AM 7:54

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DATE
JUL 26

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

Please return all correspondence concerning this matter to the following:

Cathy Julian

Name of Person

Firm/Company

16034 US HWY 19

Address

Hudson FL 34667

City/State and Zip Code

Cathy.dynamic@gmail.com

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

For further information concerning this matter, please call:

Cathy Julian

727 2378518

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 18, 2022

CATHY JULIAN
16034 US HWY 19
HUDSON, FL 34667

SUBJECT: SLIPROCK CREEK AMZN LLC
Ref. Number: L19000261057

We have received your document for SLIPROCK CREEK AMZN LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 622A00023300

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

Sliprock Creek AMZN LLC

2023 JAN -3 PM 12:09

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 10/17/19 and assigned
Florida document number L19000261057

This amendment is submitted to amend the following:

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

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)

Cathy Julian

16034 US HWY 19

HUDSON FL 34667

Enter new mailing address, if applicable:

(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:

Cathy Julian

New Registered Office Address:

16034 US HWY 19

Enter Florida street address

HUDSON

Florida 34667

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	Philip J Rugari JR	301 N Washington AVE	<input type="checkbox"/> Add
		Clearwater FL. 33755	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Cathy Julian	16034 US HWY 19	<input checked="" type="checkbox"/> Add
		HUDSON, FL. 34667	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILED
2023 JAN -3 PM 12:09
CLERK OF SUPERIOR COURT
TALLAHASSEE, FL

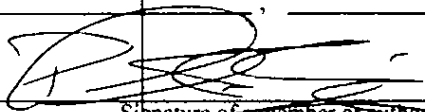
E. Effective date, if other than the date of filing: _____ (optional)

(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 7/19 _____ 2022



Signature of a member or authorized representative of a member

Philip J. Rugari, Jr.

Typed or printed name of signee