

L200000 14776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

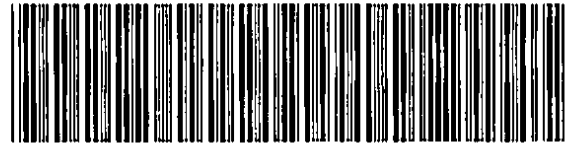
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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05/05/20--01006--017 **25.00

RECEIVED

MAY 04 2020

S TALLENT

JUN 03 2020

Handwritten signature

2020 JUN -1 AM 11:43



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 20, 2020

MARK BOSWELL
5731 FIRESTONE COURT
SARASOTA, FL 34238

SUBJECT: WHAYS SCREEN PRINTING AND EMBROIDERY LLC
Ref. Number: L20000014776

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

OWNER IS NOT AN ACCEPTABLE TITLE. PLEASE USE MGR OR AMBR AS SHOWN IN THE INSTRUCTIONS. PLEASE REMOVE REGISTERED AGENT JON NOLAN AND CRISTINA SCHULTZ OFF OF THE AUTHORIZED PERSON DETAIL PAGE AND RESUBMIT.

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.

Susan Tallent
Regulatory Specialist II

Letter Number: 120A00010221

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WHAYS Screen Printing & Embroidery 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:

Jonathan Nolan

Name of Person

WHAYS Screen Printing & Embroidery LLC

Firm/Company

417 S Florida Ave

Address

Lakeland, Florida 33801

City/State and Zip Code

whaysshirts@gmail.com

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

For further information concerning this matter, please call:

Jonathan Nolan

Name of Person

813 756-9707
at ()

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

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JUN 1 2020

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

WHAYS Screen Printing & Embroidery 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 05/01/2020 1/8/2020 and assigned
Florida document number L20000014776.

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:

417 S Florida Ave Lakeland, Florida 33801

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

417 S Florida Ave Lakeland, Florida 33801

(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:

Jonathan Nolan

New Registered Office Address:

417 S Florida Ave

Enter Florida street address

Lakeland

City

Florida 33801

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	Boswell, Mark	5731 Firestone CT Sarasota, Florida 34238	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Nolan, Jonathan	417 S Florida Ave Lakeland, Florida 33801	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Nolan, Jonathan	417 S Florida Ave Lakeland, Florida 33801	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

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.

Mark Maswell
Signature of a member or authorized representative of a member

Mark Boswell
Typed or printed name of signee

Filing Fee: \$25.00