

h20000075026

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

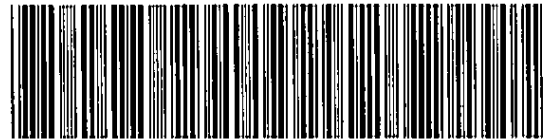
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

10/5/21
ZH
9/23

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300371621843

08/27/21--01007--002 **25.00

FILED
2021 SEP 23 AM 10:32
SECRETARY OF STATE
HALL OF RECORDS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Need to Change my Last Name (recently got married)

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:

Elizabeth Huszagh

Name of Person

Seawolf Solutions LLC

Firm/Company

3321 Robinhood Rd

Address

Tallahassee, Florida, 32312

City/State and Zip Code

liz.williford@seawolf-solutions.com

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

For further information concerning this matter, please call:

Elizabeth Williford

850

544-2161

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 32302



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2021 SEP 23 PM 4:36

September 9, 2021

ELIZABETH HUSZAGH
3321 ROBINHOOD RD
TALLAHASSEE, FL 32312 US

SUBJECT: SEAWOLF SOLUTIONS LLC
Ref. Number: L20000075026

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):

The registered agent must sign accepting the designation.

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.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 021A00021772

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

FILED

2021 SEP 23 AM 10:33

Seawolf Solutions LLC

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

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 03/06/2020 and assigned
Florida document number L20000075026.

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)

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:

Elizabeth J Williford

New Registered Office Address:

3321 Robinhood Rd

Enter Florida street address

Tallahassee

Florida

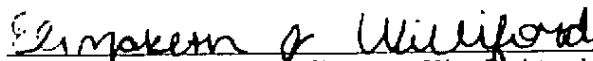
32312

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	Elizabeth J Huszagh	3321 Robinhood Rd	<input type="checkbox"/> Add
		Tallahassee, FL 32312	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Elizabeth J. Williford	3321 Robinhood Rd.	<input checked="" type="checkbox"/> Add
		Tallahassee, FL 32312	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Please change my Registered Agent name from Elizabeth J Huszagh to Elizabeth J Williford.

~~Please see attached copy of my marriage certificate.~~

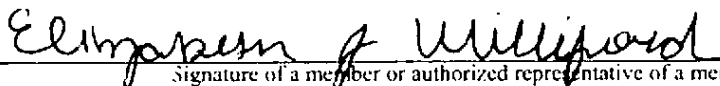
E. Effective date, if other than the date of filing: 08/05/2021 **(optional)**

(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 August 24 2021



Signature of a member or authorized representative of a member

Elizabeth J Williford

Typed or printed name of signee