

L20 000095271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

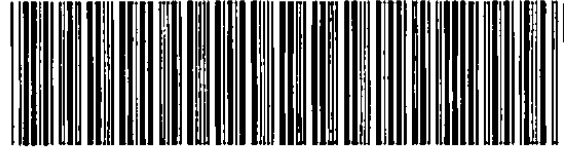
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

O SIMMONS

DEC 17 2020

# COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: Remove Member of Florida Life Safety 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:

John Stanford

Name of Person

Florida Life Safety LLC

Firm/Company

3839 Highlight St

Address

Fort Myers FL 33905

City/State and Zip Code

John@fl-lifesafety.com

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

For further information concerning this matter, please call:

John Stanford

239

565-7404

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

~~\$100.00 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/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

2023 NOV 13 PM 3:10

Florida Life Safety 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 04/02/2020 and assign  
Florida document number L20000095271.

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  
registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida 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, changed, or removed from our records:

MGR = Manager

AMBR = Authorized Member

FILED

<u>Title</u>	<u>Name</u>	<u>Address</u>	2023 NOV 13 PM 3:10	<u>Type of Action</u>
MGR	Jason Stanford	8184 Toledo Dr Fort Myers FL 33911 STATE		<input type="checkbox"/> Add
		TALLAHASSEE, FL		<input type="checkbox"/> Remove
				<input type="checkbox"/> Change
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CLERK OF STATE  
TALLAHASSEE, FL

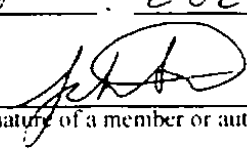
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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 605.021

**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:  
(a) The date specified in the record.  
(b) The 90th day after the record is filed.

Dated November 8th, 2020.

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

John Stanford

\_\_\_\_\_  
Typed or printed name of signee