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COVER LETTER

TO:

TO: Registration Se Division of Cor			
Atwaler Ag	ency		~
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Enid Atwater		
		Name of Person	·•
	Atwater Agency		
		Firm/Company	
	405 US Highway 1 - Suite	106B	
		Address	
	N. Palm Beach, FL 33408		
		City/State and Zip Code	
	epalmbeach@gmail.com		
	E-mail address: (to be used for future annual report not	fication)
For further information c	oncerning this matter, please co	all:	
Enid Atwater		561 762.2141	
Name o	f Person	Area Code Daytim	ne Telephone Number
Enclosed is a check for t	ne 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 Addres Registration		<u>Street Address:</u> Registration Se	ection
Division of Corporations		Division of Cor	
P.O. Box 632		The Centre of	
Tallahassee, FL 32314		2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

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

2020 AT : 21 PH 7: 47

	and assigned
The Articles of Organization for this Limited Liability Company were filed on April 20, 2020 Florida document number L20000106982	and assigned
Florida document number L20000106982	
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" o	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 agent and/or the new registered office address here:	e name of the new register
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	
, Flori	da
New Registered Agent's Signature, if changing Registered Agent:	z.p Code

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

or removed from our records: Audhorized terson MGR = Manager AMBR = Authorized Member Type of Action **Title** Name Address AMBR Enid Atwater 405 US Highway 1 - Suite 106B ■Add N. Palm Beach, FL 33408 □Remove . Change □Aðd □Remove □ Change __ 🗆 Remove ____ Change \Box Add _ □Remove ____ Change _□Add _ □Remove _____ Change _ □Add □Remove _____ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

NA	2:00 AUN 21 PM 7:47
	
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fective date, if other than the date of filing	
	cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 neet the applicable statutory filing requirements, this date will not be listed a
cument's effective date on the Department of St	
	an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
August 17	2020
nted August 17	
Signature of a n	nember or authorized representative of a member
-	•

Filing Fee: \$25.00



Department of State / Division of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name

Florida Limited Liability Company ATWATER AGENCY, LLC

Filing Information

Document Number

L20000106982

FEI/EIN Number Date Filed NONE

04/20/2020

Effective Date

04/15/2020

State

FL

Status

ACTIVE

Principal Address

405 U.S. HIGHWAY 1

#106

NORTH PALM BEACH, FL 33408

Mailing Address

405 U.S. HIGHWAY 1

#106

NORTH PALM BEACH, FL 33408

Registered Agent Name & Address

ATWATER, ENID

405 U.S. HIGHWAY 1

SUITE #106

NORTH PALM BEACH, FL 33408

Authorized Person(s) Detail

NONE: -

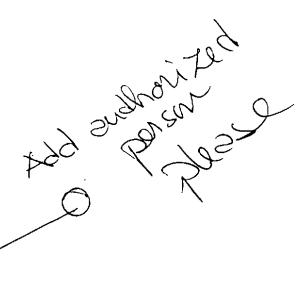
Annual Reports

No Annual Reports Filed

Document Images

04/20/2020 -- Florida Limited Liability

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