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# **COVER LETTER**

### TO: Registration Section Division of Corporations

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SUBJECT:

Johnson & Williams Investments 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:

Myron Williams

Name of Person

Johnson & Williams Investments LLC

Firm/Company

6706 Walden Circle

Address

Tallahassee FI 32317

City/State and Zip Code

myron.williams99@gmail.com

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

For further information concerning this matter, please call:

 Myron Williams
 850
 445-6026

 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)

<u>Mailing Address:</u> 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Johnson & Williams Investments LLC		
( <u>Name of the Limited L</u> (A F	iability Company as it now appears on our recor forida Limited Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liabil Florida document number	ity Company were filed on <u>6/24/2020</u>	and assigned
This amendment is submitted to amend the followir	ng:	
A. If amending name, <u>enter the new name of the</u>	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET A	DDRESS)	
		<u></u>
Enter new mailing address, if applicable:	<u> </u>	
Mailing address MAY BE A POST OFFICE BOX	<u>v</u>	
B. If amending the registered agent and/or regis agent and/or the new registered office address he		r the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	288
	. F	lorida
-	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

## MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	<b>Type of Action</b>
MGR	Vashaun Williams	2730 Beech Groove Lane	■Add
		Wesley Chapel, Fla. 33544	🗆 Remove
			□Change
MGR	Erika Williams	2730 Beech Groove Lane	Add
		Wesley Chapel, Fla. 33544	🗆 Remove
			□Change
			🖸 Add
			🗆 Remove
			🗆 Add
			🗆 Remove
			□Change
			□ Add
			□Remove
			□Change
		<u> </u>	Add
			Remove

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

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Note:	tive date, if other than the date of filing:(optional) fective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.	(3)(b) the
If the reco record is f	ord 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 filed.	

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	R
<i>v</i>	Signature of a member or authorized representative of a member
Myron Williams	
	Typed or printed name of signee

Filing Fee: \$25.00