L20000 242636

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
ertified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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11/02/20--01013--017 **25.00

FILED 2020 NOV -2 PHI2: 47

12/9/20

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CAC Shepherd Construction 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:	
Cindy L. Shepherd Name of Person	
C+C Shepherd Construction LLC	
6102 Beach DR.	
PCB, FL 32408 City/State and Zip Code	
Cindy_little@live.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Cindy Shephero at (970) 210-6084 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \text{S30.00 Filing Fee & Certificate of Status} \Bigcup \text{S55.00 Filing Fee & Certificate of Status (additional copy is enclosed)} \Bigcup \text{\$\$\$\$\$\$\$\$\$\$ \$60.00 Filing Fee, Certificate of Status (additional copy is enclosed)} \Bigcup \$	
Mailing Address: Pavistration Section Projection	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

he Articles of Organization for this Limited Liability Company	were filed on 7-27-20 and assigned
Iorida document number <u>L20000220382</u>	
his amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liab	
	2020
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	6102 Beach DR : =
Principal office address MUST BE A STREET ADDRESS)	PCB FL 32408: - F
	(same) 5
	5
nter new mailing address, if applicable:	N/A
Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office :	address on our records, enter the name of the new registered
If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
	address on our records, enter the name of the new registered
	address on our records, enter the name of the new registered
gent and/or the new registered office address here:	·
gent and/or the new registered office address here: Name of New Registered Agent:	Address on our records, enter the name of the new registered
gent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street address, Florida
gent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street address , Florida City Zip Code

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>Pres.</u> EMBR	Cindy L. Shepherd	6102 Beach DR. PCB FL 32408	□Add
., (0)		PCB FL 32408	□Remove
.).			□Change
VICE Pres. FMBR	Clark O Shepherd	Same as above	2011Add
			Change
			Remove
			Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

EINT	85-2749100	<u></u>
		
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n effective date is li te: If the date in	ther than the date of filing: ted, the date must be specific and cannot be prior to date of filing or telephone this block does not meet the applicable statutory filing the date on the Department of State's records.	(optional) more than 90 days after filing.) Pursuant to 605.0207 (3) ng requirements, this date will not be listed as the
ecord specifies a c s tiled.	elayed effective date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th day after the
10-2	1-20	
Cin	Signature of a member or authorized representative	re of a member
۸.		

-21

Filing Fee: \$25.00

Date of this notice: 08-27-2020

Employer Identification Number:

85-2749100

Form: SS-4

Number of this notice: CP 575 G

C&C SHEPHERD CONSTRUCTION LLC CINDY L SHEPHERD SOLE MBR 6102 BEACH DR P C BEACH, FL 32408

For assistance you mage call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

PH 12: 4:

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 85-2749100. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is C&CS. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.