

121000009740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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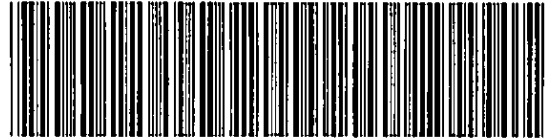
(Business Entity Name)

(Document Number)

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2022 JUL 11 PM 5:45

OCT 5 2022
S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Chance Bridwell 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:

Chance Bridwell
Name of Person

Firm/Company

1211 Arthur Avenue
Address

Panama City FL 32405
City/State and Zip Code

Bridwell41@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chance Bridwell at (850) 771-8647
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 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Chance Bridwell 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 12/31/2020 and assigned
Florida document number L21000009740

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:

New Registered Office Address:

Enter Florida street address

Florida

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

[illegible]

(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)

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 July 6th, 2022

Chance Bidwell
Signature of a member or authorized representative of a member

Chance Bridwell
Typed or printed name of signer

ALL-STATE FLOOR

2022 JUL 11 PM 5:45

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Filing Fee: \$25.00

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000009740

Entity Name: CHANCE BRIDWELL LLC

Current Principal Place of Business:

1711 ARTHUR AVENUE
PANAMA CITY, FL 32405

Current Mailing Address:

17462 FRONT BEACH RD
BOX 236
PANAMA CITY BEACH, FL 32413

FEI Number: 86-1745130

Name and Address of Current Registered Agent:

BRIDWELL, WILSON CHANCE
1711 ARTHUR AVENUE
PANAMA CITY, FL 32405 US

Certificate of Status Desired: Yes

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name SHELLY, DWYER MARIE
Address 1711 ARTHUR AVENUE
City-State-Zip: PANAMA CITY FL 32405

Title AUTHORIZED MEMBER
Name BRIDWELL, WILSON CHANCE
Address 1711 ARTHUR AVENUE
City-State-Zip: PANAMA CITY FL 32405

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILSON CHANCE BRIDWELL

AUTHORIZED MEMBER

01/31/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date