LZ1000083257

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
_	_	_
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
	-	
		
Special Instructions to	Filing Officer:	
	<u>.</u>	

Office Use Only



200361092372

03/04/21--01016--028 **25.00

2021 MEX = 1 - AM 11 : 4 O

COVER LETTER

TO: Registration Section Division of Corporations		
Falectic Prop	ictios 110	er e
		·
Amendment and fec(s) are sub	omitted for filing.	
idence concerning this matter	to the following:	
Thomas	m. James JR.	
Fclectic	Properties, LC	
	Firm/Company	
8610	Surf DR #1	08
	Address	
Pasana C	STV ROAL FL 3	KN 408
ranging C	City/State and Zip Code	32 / 3
TJAMES @ !	LST ALLIANCE R	EALTY, COM
E-mail address: (to be used for future annual repor	t notification)
ncerning this matter, please ea	all:	
James Jr.	at(618) 5	30 - 3069
Person	Area Code Da	aytime Telephone Number
: following amount:		
☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>:</u>	Street Addres	ss:
ection	Registration	Section
prporations	Division of	Corporations
	Felectic Propositions Felectic Proposition Name of Limits Amendment and fee(s) are subsidence concerning this matter Thomas Felectic 8610 Panama C TJAMES Q C E-mail address: (Incerning this matter, please of the concerning this matter) please of the concerning this matter. Significant of Status	Thomas M. James Jr., Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Idence concerning this matter to the following: Thomas M. James Jr., Name of Person Felectic Properties, LLC Firm/Company 8610 Surf Dr. # 1 Address Panama City Beach FL. 3 City/State and Zip Code TJAMES Q 1 ST ALLIANCE R E-mail address: (to be used for future annual report Incerning this matter, please call: James Jr. at (618) 5 Person Area Code Di stollowing amount: S30.00 Filing Fee & Certified Copy (additional copy is enclosed) Street Address Registration Street Address Registration

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on Feb. 18; 2021	and assigned
Florida document number <u> </u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, enter the nam	<u>ie of thể new regi</u>
igent and/or the new registered office address here.		- 244 - 275 - 27
Al CAL BUT A LA		i jan
Name of New Registered Agent:		
New Registered Office Address:		AMIII: 110
	Enter Florida street address	=
	, Florida	. 110
	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Thomas m. James Je.	8610 Surf Dr. #108	X/vdd
		Panama City Beach, FL 32408	□Remove
			Change
MGR	Kristen M. James	8610 Surf Da.	□Add
		Parama City Beach, FL. 32408	≭ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		□Remove	
		🗆 Change	
			□Add
			□Remove
			□Change

_	
-	
ffective	date, if other than the date of filing: (optional) re 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
<u>ote:</u> if ti	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ocument`	s effective date on the Department of State's records.
is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	March 1 ^{5T} 2021 March 1 ^{5T} 2021 Signature of a member or authorized representative of a member Thomas M. James JR.
	Morras Isfames Cf.
	Signature of a member or authorized representative of a member
	Thomas M. James Ja.
	. Typed or printed name of signee

Filing Fee: \$25.00