

L21 000 268 365



Ms. Sally S. Morrill
1445 Highway 177A
Bonifay, FL 32425-7601

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

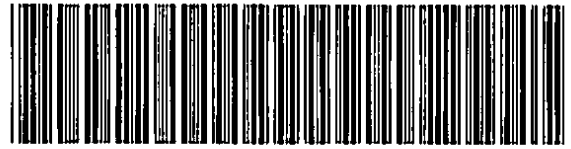
685
776
707
671

10/25

9/14

~~10/14~~

Office Use Only



500369288155

12/03/21--01020--020 **25.00

FILED
2021 OCT 25 PM 3:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC
N/C

DEC 08 2021

D CONNELL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 OCT 25 PM 12:49

October 6, 2021

SALLY S MORRILL
1445 HIGHWAY 177A
BINIFAY, FL 32425

SUBJECT: SINNOVATIONS LLC
Ref. Number: L21000268365

We have received your document for SINNOVATIONS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The fee to file your limited liability company document is \$25. Please include an additional \$30 for each certified copy (optional) requested and an additional \$5 for each certificate of status (optional) requested.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SASHA B PENNYWELL
Regulatory Specialist II

Letter Number: 721A00023986

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2021 OCT 25 PM 3:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

SINNOVATIONS 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 June 9, 2021 and assigned
Florida document number L210000268365.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Schave Innovations LLC
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)

Schave Innovations LLC
1445 Highway 177A
Bonifay, FL 32425

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as above

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:

Sally Schave Morrill CEO

New Registered Office Address:

1445 Hwy. 177A
Enter Florida street address

Bonifay Florida 32425
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.

Sally Schave Morrill
If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

Dear Sec. of State:

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

I wish to change the name of SInnovations, LLC
to Schave ~~INC~~ LLC since there is already another
LLC Corp. registered in FL. named SInnovations.

Everything else should stay the same except
for the New Name for our LLC be Schave LLC.

The License No: L21000268365

EIN No: 871435631

Password: 123 @ Mickey

I would like everything sent to me in the
mail to Sally Schave CEO (i.e. Sally Schave Morrill,

1445 Hwy. 177A

Ph No: (850) 547-2238

Bonifay, FL 32425

~~Pro~~

I also need written proof of the EIN document
so I can open a company bank acct.

All our thanks; Jeffrey Morrill & Sally Schave Morrill.

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 Sept. 9, 2021.

Sally S. Morrill CEO

Signature of a member or authorized representative of a member

Sally S. Morrill CEO

Typed or printed name of signee

24 SEP 14 AM 7:35

Filing Fee: \$25.00