

L21000395911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

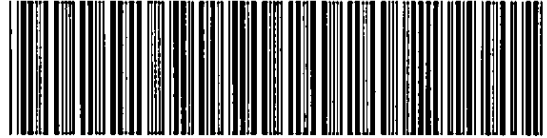
(Business Entity Name)

(Document Number)

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10/12/21--01036--008 \*\*25.00

23 OCT 12 AM 11:19

*JS*

*Sheehan & Celaya, P.A.*

ATTORNEYS AT LAW

300 DAL HALL BOULEVARD  
LAKE PLACID, FLORIDA 33852

ROBERTO P. CELAYA

863-465-1551  
FAX 863-465-5251

October 6, 2021

[roberto@sejuris.com](mailto:roberto@sejuris.com)

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

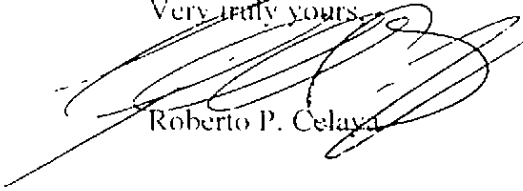
Re: Articles of Amendment to Articles of Organization  
To WOODY'S BY THE LAKE, LLC

Dear Sir/Madam:

Please find enclosed Articles of Amendment to Articles of Organization to be filed regarding the above-referenced limited liability company. You will also please find enclosed our office check in the amount of \$25.00 representing the filing fee.

Thank you for your consideration in this matter.

Very truly yours,

  
Roberto P. Celaya

RPC:gl  
Enclosures – As Stated  
Xc: Client

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WOODY'S BY THE LAKE, 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:

WILLIAM T. DUNCAN

\_\_\_\_\_  
Name of Person

WOODY'S BY THE LAKE, LLC

\_\_\_\_\_  
Firm/Company

2009 FORTUNE BLVD. # 115

\_\_\_\_\_  
Address

SEBRING, FL 33870

\_\_\_\_\_  
City/State and Zip Code

WTYOYO@AOL.COM

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

For further information concerning this matter, please call:

ROBERTO P. CELAYA

863 465-1551  
at ( )

\_\_\_\_\_  
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**

WOODY'S BY THE LAKE, 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 09/07/2021 and assigned  
Florida document number L21000395911.

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*

*City*

**Florida**

*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**

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	WILLIAM T. DUNCAN	2009 FORTUNE BLVD.	<input checked="" type="checkbox"/> Add
		SEBRING, FL 33870	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DEBRA K. DUNCAN	2009 FORTUNE BLVD.	<input checked="" type="checkbox"/> Add
		SEBRING, FL 33870	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DUNCAN REV. LIVING TRUST	2009 FORTUNE BLVD.	<input type="checkbox"/> Add
		SEBRING, FL 33870	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

23 OCT 12 AM 11:20

23 OCT 12 AM 11:20

(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 Oct 6 2021  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member  
William T Duncan  
 \_\_\_\_\_  
 Typed or printed name of signee

**Filing Fee: \$25.00**