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





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T. MATTHEWS MAR 16 2022

Scott Thomas Pool Service LLC 8610 SE 163 Lane Summerfield, FL 34491 (352) 484-6641

March 01, 2022

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

Sir or Maam,

Please accept this amendment to add myself as an AP to Article V of my Articles of Organization. Along with my wife, Joanne M. Thomas, also an AP, it is my intention to open a business account with Wells Fargo. According to Wells Fargo, I need to add myself in order to open an account.

Please feel free to write, call, or email with any questions concerning this change.

Respectfully submitted,

Scott Thomas

COVER LETTER

TO:

TO: Registration S Division of Co			
Scott Thor	nas Pool Service LLC		
SUBJECT:	Name of Lin	ited Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Scott Thomas		
		Name of Person	
	Scott Thomas Pool Service	LLC	
	 	Firm/Company	
	8610 SE 163 Lane		
		Address	
	Summerfield, FL 34491		
		City/State and Zip Code	
	Scottypools12@gmail.com E-mail address: (to be used for future annual report notification	<u> </u>
For further information of	concerning this matter, please c	·	
Scott Thomas		352 484-6641	
Name	of Person	Area Code Daytime Telepl	none Number
Enclosed is a check for t	he following amount:		
77. \$25.00 Filing Fee	☐ \$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)
Mailing Addre		Street Address: Pagiotration Section	
Registration Section Division of Corporations		Registration Section Division of Corporati	ons
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallaha	
i ananassee,	11, 32314	2415 N. Monroe Stree Tallahassee, FL 3230	· ·

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22111-7 711 3:13

Scott Thomas Pool Service LLC			
(Name of the Limi	ited Liability Co (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited L Torida document number L22000014457	Liability Comp	pany were filed on January 06, 2022	and assigned
his amendment is submitted to amend the fol	lowing:		
a. If amending name, enter the new name o	of the limited	liability company here:	
IA			
he new name must be distinguishable and contain the	words "Limited l	Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		NA	
Principal office address MUST BE A STREI	ET ADDRES	<u> </u>	
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	BOX)	NA	
If amending the registered agent and/or gent and/or the new registered office address		fice address on our records, <u>enter the</u>	name of the new regist
Name Bankara d Office A 11	NA		
New Registered Office Address:		Enter Florida street address	
		, Floric	ia
		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
AP	Scott Thomas	8610 SE 163 Lane Summerfield FL 34491	🛢 Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			🗀 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			Петюче
			Chance

	NA .
(If an ef Note:	(optional) fective date, if other than the date of filing: [continue 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)(8) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
the reco	rd 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 led.
Dated	03/01/2022
	feat Amai
	Signification of a member or authorized representative of a member
	SOUT THOMAS
	Typed or printed name of signee

Filing Fee: \$25.00