

L22000016435

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

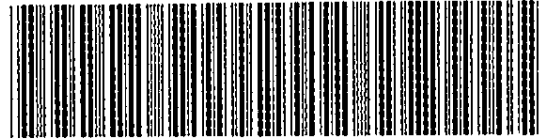
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JAN 21 2022

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 1/18/2022

NAME: MKENNEDY & MORE LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

A Hodge



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 19, 2022

FLORIDA FILING & SEARCH SERVICES

SUBJECT: MKENNEDY&MORE.LLC
Ref. Number: L22000016435

We have received your document for MKENNEDY&MORE.LLC and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

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The document is too dark for imaging. I tried to lighten the document but made it worse.

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

Catherine M Brumley
Regulatory Specialist II

Letter Number: 522A00001396

Please keep original file date
Thank you!

TO: Registration Section
Division of Corporations

SUBJECT:

MKENNEDY & MORE 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:

Byron Kennedy

Name of Person

M Kennedy & More LLC

Firm/Company

12557 New Brittany Blvd #3

Address

Ft. Myers, FL 33907

City/State and Zip Code

alissa Kennedy 626@gmail.com

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

For further information concerning this matter, please call:

Byron Kennedy

Name of Person

at (239) 270-0752

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 ORGANIZATION
TO
ARTICLES OF ORGANIZATION
OF

M KENNEDY & MORE, 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 11/7/22 and assigned
Florida document number L22 0000 16435

This amendment is submitted to amend the following:

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

M Kennedy & More, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

12557 New Brittany Blvd
Suite #3
Fort Myers, FL 33907

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12557 New Brittany Blvd.
Suite #3
Fort Myers, FL 33907

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

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>
MGR	Kennedy, Byron M	365 Clark St.	<input type="checkbox"/> Add
		N. Ft Myers, FL 33903	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Kennedy, Byron M	365 Clark St.	<input checked="" type="checkbox"/> Add
		North Fort Myers FL	<input type="checkbox"/> Remove
		33903	<input type="checkbox"/> Change
AMBR	Villatte, Andre	11230 Cypress Tree Circle	<input checked="" type="checkbox"/> Add
		Fort Myers, FL 33913	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

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.

Dated January 14, 2022

Byron M. Kennedy
Typed or printed name of signee

Filing Fee: \$25.00