122000123426

	(Requestor's Name)	
	(Address)	.
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL
	(Business Entity Name)	
<u>-</u>	(Document Number)	
Certified Copies	Certificates of	Status
Special Instruction	s to Filing Officer:	
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72 JUL -5 PM 3: 25

T. MATTHEWS
JUL 2 2 2022



RECEIVED

2022 JUL -5 AMII: 28

STOLE ANASSES EN FILE

TAIL EXTRASSES EN FILE

June 15, 2022

TROY E. BOUTWELL 4075 SPRING PARK WAY BROOKSVILLE, FL 34604

SUBJECT: BOUTWELL CONSTRUCTION LLC

Ref. Number: L22000123426

We have received your document for BOUTWELL CONSTRUCTION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Letter Number: 522A00013407

Tekayla T Matthews OPS

www.sunbiz.org

COVER LETTER

· TO:

Registration Section

Divi	ision of Cor	porations				
(2 E 1 E 2 E 2 E 2 E 2 E 2 E 2 E 2 E 2 E	BOUTWEI	LL CONSTRUCTION LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
		ondence concerning this matter	-			
Tiende Fermin	un oonenja	mainte concerning this matter	to the who thing.			
			Troy E Boutwell			
			Name of Person			
		BOUTWELL CONSTRUC	CTION LLC			
			Firm/Company			
		4075 Spring Park Way				
			Address			
		Brooksville, FL 34604				
			City/State and Zip Code			
		boudown10@yahoo.com E-mail address: (to be used for future annual report i	notification)		
For further in	iformation c	oncerning this matter, please c	·			
Troy E Bout	well		352 233-7059			
	Name o	f Person	at () Area Code Day	time Telephone Number		
Enclosed is a	check for th	ne following amount:				
■ \$25.00 F	iling 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)		
	ling Addres		Street Address Registration			
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee			
	lahassee, l			roe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILLED SECRETARY OF STATE OTVISION OF CORPORATIONS

BOUTWELL CONSTRUCTION LLC

22 JUL -5 PM 3: 25

(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 03/10/2022	and assigned
Florida document number L22000123426		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" of	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 a agent and/or the new registered office address here:	address on our records, <u>enter th</u>	ne name of the new registered
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street address	
	, Flor	ida
	City	Zip Code

New Registered Agent's Signature, it 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>	Name	Address	Type of Action
tesident	Troy Bartwell	4075 Spring ParkWay	= Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
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n effective da <mark>te:</mark> If the da	te is listed, the d ate inserted in	ate must be speci	ific and cannot s not meet the	be prior to date e applicable st	of filing or more atutory filing re	than 90 days afte	ional) r filing.) Pursuant is date will not b	to 605.020 be listed as
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cord specif s filed.	ies a delayed e	ffective date, b	out not an effe	ective time, at	12:01 a.m. on t	he earlier of: (b) The 90th day	y after the
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		Signatur	e of a member		epresentative of a			
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