

L22000172988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

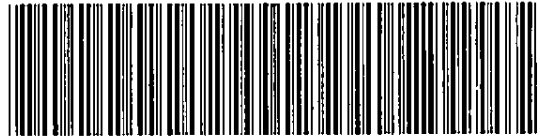
(Business Entity Name)

(Document Number)

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4/24/23
V. L. L.

SECRETARY OF STATE
TALLAHASSEE, FL

2023 FEB 22 AM 8:01

FILED

DECLARATION

TO: Registration Section
Division of Corporations

SUBJECT: Paddle Jax 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:

Florence Ferris
Name of Person
Paddle Jax Amelia LLC
Firm/Company
5937 Piper Glen Blvd
Address
Jacksonville FL 32222
City/State and Zip Code
paddlejax1@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Florence Ferris 904 404-6758
Name of Person at (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

Paddle Jax 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 4/11/2011 and assigned
Florida document number L22000172988.

This amendment is submitted to amend the following:

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

Paddle Jax Amelia 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)

5937 Piper Glen Blvd

Jacksonville FL 32222

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5937 Piper Glen Blvd

Jacksonville FL 32222

FILED
2023 FEB 22 AM 8:01
SECRETARY OF STATE
TALLAHASSEE, FL

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:

Florence Ferris

New Registered Office Address:

5937 Piper Glen Blvd

Enter Florida street address

Jacksonville

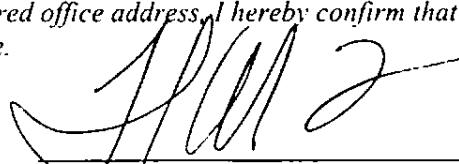
Florida 32222

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

Information will be removed from the list if you do not 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	Florence Ferris	5937 Piper Glen Blvd	<input checked="" type="checkbox"/> Add
		Jacksonville FL 32222	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Laura Wagner	109 Creekwood Cir	<input checked="" type="checkbox"/> Add
		Kingsland GA 31548	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(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.

Signature of a member or authorized representative of a member

Florence M. Ferris
Typed or printed name of signee

Filing Fee: \$25.00