# L22000393771

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

Office Use Only





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## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	hnson' SFame Lu Name of Lin	Homes IC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Sierro	Name of Person	
		Firm/Company	
	4990 nw	13th Cauf Address	
	laudarhi	City/State and Zip Code  49.78@ quai (.C) to be used for future dinual report notificall:	22 SEP 20 PM 12: 57
	Sieva Sc	19.28@ quai (.C	om = = = = = = = = = = = = = = = = = = =
For further information c	roncerning this matter, please co	all:	112: 57
Sierra J	Ohnson OPerson	at (754) 28 - Area Code Daytime	e Telephone Number
Enclosed is a check for ti	he 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)
Malling Address	No.	Street Address	

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

Tol	insanis.	tamily Homes 11C	
(Name of the Elmite	d Liability Compa A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liz Florida document number <u>L 12 000 39</u>		were filed on 60 08 2022	and assigned
This amendment is submitted to amend the following	wing:		
A. If amending name, enter the new name of	the limited liab	illity company here:	
The new name must be distinguishable and contain the we	ords "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applica	ible:	8170 SW Gth Stree	+
(Principal office address MUST BE A STREET	(ADDRESS)	North lauderday	0 + 133068
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u>80X)</u> -		22 SEP
B. If amending the registered agent and/or reagent and/or the new registered office address		address on our records, enter the name	of the new registered
Name of New Registered Agent:		a A. Jamnson	PH 12: 5
New Registered Office Address:	8170 SV	v lota Street	7
	North	Enter Florida street address  A City  Enter Florida - 7	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>	Name	Address	Type of Action
P	Sierra A. Johnson		🗆 Add
			□Remove
		8170 SW 4th Street F1370	KChange
			⊡Add
		<u> </u>	□Remove
			[]Change
			22 ± 22
			Change -
			22 & P 200 PH 127dd
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ffective date is listed: If the date insert	er than the date of fi the date must be specific ed in this block does nate on the Department	c and cannot be prior to date not meet the applicable st	of filing or more than ntutory filing requir	(optional) 90 days after filing.) Pu ements, this date wil	rsuant to 605.0 I not be listed
ord specifies a dela filed.	yed effective date, but	not an effective time, at	12:01 a.m. on the e	arlier of: (b) The 90	)th day after t
. Septen	ber 16th		ul		

Filing Fee: \$25.00



Department of State / Division of Corporations / Search Records / Search by Entity Name /

### **Detail by Entity Name**

Florida Limited Liability Company JOHNSON'S FAMILY HOMES LLC

**Filing Information** 

**Document Number** 

L22000393771

**FEVEIN Number** 

NONE

**Date Filed** 

09/08/2022

**Effective Date** 

09/08/2022

State

FL

Status

Principal Address

920 NW 34TH TERRACE

LAUDERHILL, FL 33311

7 chayeto: 8/70 sweenst voin lackatore

**Malling Address** 

2555 NW 49TH AVENUE

LAUDERDALE LAKES, FL 33313

Registered Agent Name & Address

JOHNSON, SIERRA A

920 NW 34TH TERRACE

LAUDERHILL, FL 33311

1 Change to: 8170 SW Cetu St Normaladarkall

Authorized Person(s) Detail

Name & Address

Title P

JOHNSON, SIERRA A 920 NW 34TH TERRACE LAUDERHILL, FL 33311

7 Charge fo: 8/70 Sweeter Late F1 33068

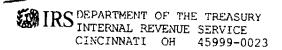
**Annual Reports** 

No Annual Reports Filed

**Document Images** 

09/08/2022 -- Florida Limited Liabitity

View image in PDF format



Date of this notice: 09-13-2022

Employer Identification Number: 92-0276535

Form: SS-4

Number of this notice: CP 575 G

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

JOHNSONS FAMILY HOMES LLC SIERRA JOHNSON SOLE MBR 2555 NW 49TH AVE APT 102 LAUD LAKES, FL 33313

#### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 92-0276535. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did **not** apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.