

123000014447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

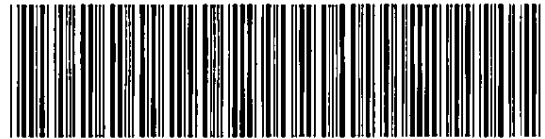
(Business Entity Name)

(Document Number)

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SE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HUMPHREYS CONSTRUCTION, 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:

FRANK C HUMPHREYS

Name of Person

HUMPHREYS CONSTRUCTION, LLC

Firm/Company

2041 NORTH ROBERTS CIRCLE

Address

PENSACOLA, FLORIDA 32534

City/State and Zip Code

HUMPHREYSCONSTRUCTIONLLC@GMAIL.COM

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

For further information concerning this matter, please call:

FRANK C HUMPHREYS

850 291-8933
at ()

Name of Person

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

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TALLAHASSEE, FL

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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	FRANK C HUMPHREYS	2041 NORTH ROBERTS CIRCLE	<input checked="" type="checkbox"/> Add
		PENSACOLA, FLORIDA	<input type="checkbox"/> Remove
		32534	<input checked="" type="checkbox"/> Change
MGR	TAMATHA HUMPHREYS	2041 N Roberts Cir	<input type="checkbox"/> Add
		Pcola FL 32534	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

• Change Frank Humphreys
from Registered Agent to Manager

• Remove Tamatha Humphreys
from LLC

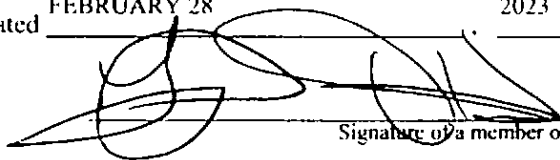
E. Effective date, if other than the date of filing: 02/28/2023 (optional)

(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)

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.

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.

Dated FEBRUARY 28 2023



Signature of a member or authorized representative of a member

FRANK C HUMPHREYS

Typed or printed name of signee

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