

L23000 248333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

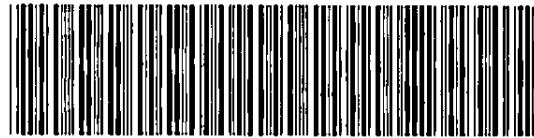
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2023 MAY 31 AM 9:20

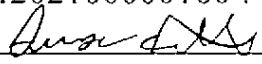
RECEIVED
2023 MAY 31 AM 8:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. BUTLER

JUN - 1 2023

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from this account: I202100000160 : \$60.00

Authorization Signature: 

John D. Mason LLC L23000248333

BUSINESS DOC#

X Certified Copy of Articles

X Certificate of Status

NEW FILINGS

 Profit Corp
 Not for Profit
 Officer/Director
 Limited Liability
 Domestication
 Other
 CORP
 LLLP

AMENDMENTS

X Amendment
 Resignation of R.A. or member
 Dissolution
 Change of Registered Agent
 Revocation of Dissolution
 Merger
 Conversion
 Amended and restated Articles
 Statement of Authority

OTHER FILINGS

 Trademark
 Annual Report
 Fictitious Name
 APOSTILLE

Country

REGISTRATION/QUALIFICATIONS

 Foreign filing
 Limited Partnership
 Reinstatement
 Other

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JOHN D MASON 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:

JOHN D MASON

Name of Person

JOHN D MASON LLC

Firm/Company

1050 31ST AVENUE

Address

VERO BEACH, FLORIDA 32960

City/State and Zip Code

JDMMDJ@GMAIL.COM

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

For further information concerning this matter, please call:

JOHN D MASON

941

400-7983

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

JOHN D MASON LLC

(Name of the Limited Liability Company as it now appears on our records) 5/22/2023 10:26 AM
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 5/22/2023 and assigned
Florida document number 123000248333.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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	JOHN D MASON	1050 31ST AVENUE	☒ Add
		VERO BEACH, FL 32960	☐ Remove
			☐ Change
AMBR	CAMERON S GEORGE	1050 31ST AVENUE	☐ Add
		VERO BEACH, FL 32960	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Add
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			☐ Change
			☐ Add
			☐ Remove
			☐ Change

[illegible]

MAY 30, 2023

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 MAY 30 2023


Signature of a member or authorized representative

Signature of a member or authorized representative of a member

CAMERON S GEORGE

Typed or printed name of signee

Filing Fee: \$25.00