

L23000333502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

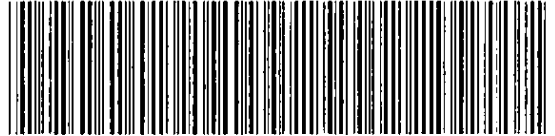
(Business Entity Name)

(Document Number)

Certific Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700412617887

07/21/23--01009--006 **25.00

FILED

2023 JUL 21 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bubba-B, 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:

Susan Von Hoene

Name of Person

Von Hoene Law Firm

Firm/Company

P. O. Box 1527

Address

Santa Rosa Beach, FL 32459

City/State and Zip Code

susan@vonhoenelawfirm.com

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

For further information concerning this matter, please call:

Susan Von Hoene

\$50

622-4038

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**

Bubba B, 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 July 13, 2023 and assigned
Florida document number 1.23000333502.

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)

147 Beacon Point Dr.

Santa Rosa Beach, FL 32459

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 6517

Miramar Beach, FL 32550

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:

Clayton Bonjean

New Registered Office Address:

147 Beacon Point Dr.

Enter Florida street address

Santa Rosa Beach

, Florida 32459

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>
MGRM	Clayton Bonjean	12870 US Highway 98 West	<input type="checkbox"/> Add
		Miramar Beach, FL 32550	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Katherine Bonjean	12870 US Highway 98 West	<input type="checkbox"/> Add
		Miramar Beach, FL 32550	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Clayton F. Bonjean, LLC	147 Beacon Point Drive	<input checked="" type="checkbox"/> Add
		Santa Rosa Beach, FL 32459	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2023 JUL 21 AM 10:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED
2023 JUL 21 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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.

Handwritten Signature
Signature of a member or authorized representative of a member

Typed or printed name of signee