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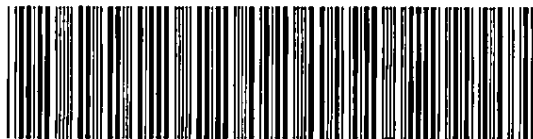
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(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Derrick O'Connell 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:

Derrick O'Connell

Name of Person

Derrick O'Connell LLC

Firm/Company

1343 Chokoloskee Drive

Address

Chokoloskee, FL 34138

City/State and Zip Code

mandi0709@gmail.com

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

For further information concerning this matter, please call:

Amanda L. O'Connell

239

494-2979

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**

Derrick O'Connell 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 February 2, 2024 and assigned
Florida document number L24000062440.

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

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (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 May 3 . 2024

Derrick O'Connell

Signature of a member or authorized representative of a member

Derrick O'Connell

Typed or printed name of signee

Filing Fee: \$25.00

**SPECIAL MINUTES OF ACTION(S) TAKEN IN LIEU OF A MEETING
OF THE MEMBERS OF
DERRICK O'CONNELL LLC**

The undersigned, being the sole member of **Derrick O'Connell LLC**, (hereinafter referred to as the "**Company**"), consents in writing to the adoption of the following resolutions, taking said action in lieu of a meeting, as permitted by 608.4231 of the Florida Limited Liability Company Act:

RESOLVED that it is in the best interest of the Company that the following persons are designated managers of the Corporation to serve for one year or until a successor is elected and qualified:

DERRICK O'CONNELL
AMANDA L. O'CONNELL

RESOLVED, that the Article IV of the Articles of Organization of the Company shall be amended, changed, and altered to reflect the above Manager designations.

RESOLVED that the sole member is hereby authorized and directed to file Articles of Amendment to Articles of Organization with the Secretary of State, Division of Corporations.

DERRICK O'CONNELL LLC further certifies that the resolutions set forth above are in full force and effect and have not been altered, modified or rescinded.

IN WITNESS WHEREOF, the sole member has executed this consent to action of the Company this 3 day of May, 2024.

**DERRICK O'CONNELL LLC, a Florida
limited liability company**

By: Derrick O'Connell
Derrick O'Connell, Member