

MA1000002777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2022 FEB 22 PM 1:33
CLERK OF COURT
STATE OF FLORIDA

C. BRUMBLEY
FEB 21 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Whiteley Oliver, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chanci Maldonado

Name of Person

Whiteley Oliver, LLC

Firm/Company

815 Walker Street, Suite 453

Address

Houston, TX 77002

City/State and Zip Code

chanci.maldonado@whiteleyoliver.com

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

For further information concerning this matter, please call:

Chanci Maldonado

Name of Person

at (409) 370-7405

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee ☒ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Whiteley Oliver, LLC

Enter new principal office address, if applicable: 815 Walker Street, Suite 453

(Principal office address

MUST BE A STREET ADDRESS)

Houston, TX 77002

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

815 Walker Street, Suite 453

Houston, TX 77002

2. The Florida document number of this limited liability company is: M21000002777

3. Jurisdiction of its organization: Texas

4. Date authorized to do business in Florida: 3/11/2021

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Same Name
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: Same as before. No change. Capitol Corporate Services, Inc.

New Registered Office Address: 515 East Park Avenue 2nd floor,

Enter Florida Street Address

Tallahassee

City

Florida

32301

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

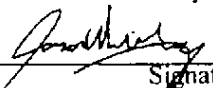
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

Same as before. No changes.

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Manager	Stan Oliver	3250 Eastex Fwy	<input type="checkbox"/> Add
		Beaumont, TX 77703-2649	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
Member	Shawn Christensen	815 Walker Street, Suite 453	<input checked="" type="checkbox"/> Add
		Houston, TX 77002	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Jason W. Whiteley

Typed or printed name of signee

Filing Fee: \$25.00