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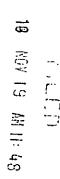
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O SIMMONS DEC 0 1 2018

COVER LETTER

		on Section Corporations	
SUBJEC		OONERS, I.LC	
	•	Name of Limited Liability Company	
The enclo	sed Articl	s of Amendment and fee(s) are submitted for filing.	
Please ret	urn all coi	espondence concerning this matter to the following:	
		HENRY CASADO, REGISTERED AGENT	
		Name of Person PONTOONERS, LLC	
		Firm/Company 300 THREE ISLAND BLVD., UNIT #803	
		Address HALLANDALE BEACH, FL. 33009	
		City/State and Zip Code	
		E-mail address: (to be used for future annual report notification)	
For further	informat HEN Na	at (786) 488-1711 Area Code Daytime Telephone Number	_
Enclosed is	s a check (or the following amount:	
\$25.00			tatus &

MAILING ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PONTOONERS, LLC				(co
(Name of the Li	mited Liability Comp (A Florida Limited	any as it now appears Liability Company)	on our records.)	艺
The Articles of Organization for this Limited	Liability Company	were filed on 10/1	7/2018	and assigned
Florida document number L18000244224	·			
This amendment is submitted to amend the fo	ollowing:			and assigned
A. If amending name, enter the new name	of the limited liab	oility company her	<u>e</u> :	A. T. C.
			<u> </u>	
The new name must be distinguishable and contain the	e words "Limited Liabi	lity Company," the des	ignation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if app	licable:	300 THREE ISLAND BLVD., UNIT #803		
Principal office address MUST BE A STRI	EET ADDRESS)	HALLANDALE BEACH, FL. 33009		
Enter new mailing address, if applicable:		300 THREE ISLA	ND BLVD., UNIT #	803
Mailing address MAY BE A POST OFFIC	HALLANDALE I	BEACH, FL. 33009		
B. If amending the registered agent an registered agent and/or the new registered	d/or registered of office address her	ffice address on e	our records, <u>enter</u>	the name of the r
Name of New Registered Agent:	 			
New Registered Office Address:	300 THREE ISLAND BLVD., UNIT #803			
		Enter Floride	street address	
	HALLANDALI	Е ВЕАСН	, Florida _3	3009
		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

or removed from our records:

MGR = Manager ;
AMBR = Authorized Member :

<u>Title</u>	Name	Address	Type of Action
AMBR	CASADO, HENRY	300 THREE ISLAND BLVD	
		LIMIT HOO	□ Add
		UNIT #803	
			Remove `
		HALLANDALE BEACH, FI. 33009	Change
MGR	CASADO, MELISSA A.	300 THREE ISLAND BLVD.	GPAdd ==
		UNIT #803	6
		HALLANDALE BEACH, FL	C Remove
		33009	□ Remove - '
AMBR	CALAMBICHIS, EMMANUEL	300 THREE ISLAND BLVD	»·
			= Add
		PENTHOUSE I	_
			Remove
		HALLANDALE BEACH, FL 33009	□ Change
AMBR	CALAMBICHIS, ROSANA	300 THREE ISLAND BLVD	
		PENTHOUSE 1	
			☐ Remove
		HALLANDALE BEACH, FI 33009	
		33009	Change
AMBR	GIACONIA, VINCENT	300 THREE ISLAND BLVC	
4,4.			
		UNIT #206	
			☐ Remove
		HALLANDALE BEACH, FL 33009	Change
	GIACONIA, MARIA A.	300 THREE ISLAND BLVD	Change
MGR	·		
		UNIT #206	
			□ Remove
		HALLANDALE BEACH, FL	
		33009	Change

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Tective date	, if other than the date of	filing: 10/24/2018	(0	ptional)
an effective date ote: If the da	e is listed, the date must be speci	fic and cannot be prior to da	ate of filing or more than 90 days a statutory filing requirements.	ifter filing.) Pursuant to 605.020
cument's eff	ective date on the Departmen	nt of State's records.	statutory ming requirements,	tins date will not be fisted as
record sp	ecifies a delayed effect	ive date, but not ar	n effective time, at 12:0	1 a.m. on the earlier o
The 90th d	lay after the record is f	iled.		
	110			
ated/4	0/24/18	- ' 72/6"	\mathcal{J}	
,				
	Signatur	e of a member or authorized	d representative of a member	
1.75	LISSA A. CASADO, MGR	11		

Page 3 of 3

Filing Fee: \$25.00