

L19000237964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FEB 24 2021

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MAR 03 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2021

RONALD GOLDBERG
8317 LAUREL LAKES WAY
NAPLES, FL 34119-6793

SUBJECT: FALCONCREST LIMITED LLC
Ref. Number: L19000237964

We have received your document for FALCONCREST LIMITED LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 521A00001683

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FALCONCREST LIMITED 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:

RONALD J GOLDBERG

Name of Person

Firm/Company

8317 LAUREL LAKES WAY

Address

NAPLES, FL 34119-6793

City/State and Zip Code

rg.alliancecapital@gmail.com

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

For further information concerning this matter, please call:

RONALD J GOLDBERG

646 468-6300
at ()
Area Code Daytime Telephone Number

Name of Person

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**

FALCONCREST LIMITED LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 10/01/2019 and assigned
Florida document number L19000237964.

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:

8317 LAUREL LAKES WAY

(Principal office address MUST BE A STREET ADDRESS)

NAPLES, FL 34119-6793

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:

Alliance Capital Florida Corp

New Registered Office Address:

8317 LAUREL LAKES WAY

Enter Florida street address

NAPLES

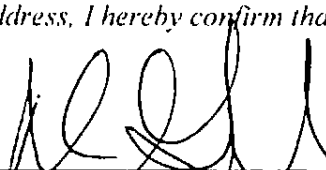
City

Florida 34119-6793

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>
AMBR	RONALD J GOLDBERG	8317 LAUREL LAKES WAY	☒ Add
		NAPLES, FL 34119-6793	☐ Remove
			☐ Change
A.MBR	MIGDALL, ALLAN M	MIGDALL, ALLAN M	☐ Add
		1515 SOUTHEAST 11TH STREET	☒ Remove
		FORT LAUDERDALE, FL 33316	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

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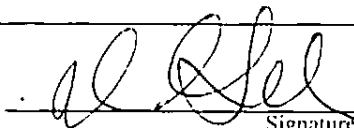
E. Effective date, if other than the date of filing: _____ (optional)

(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 12/03/2020 2020



Signature of a member or authorized representative of a member

RONALD J GOLDBERG

Typed or printed name of signee