L19000761463

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO:

	Registration Solution of Con			
SUBJEC	Lexaire, Ll	LC		
SUBJEC	. I:	Name of Lin	nited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Sam L. Scalise		
			Name of Person	
		Lexaire, LLC		
			Firm/Company	
		1030 3rd. Ave. S., #117		
			Address	
		Naples, FL 34102		
			City/State and Zip Code	
		rtalbert@scalisegroup.com		
		E-mail address: (to be used for future annual report no	tification)
For furthe	er information c	oncerning this matter, please c	ali:	
Renee E.	. Talbert		843 450-3983	
·	Name o	f Person		me Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$ 25.0	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 Addres Registration S		Street Address:	ootion
	Division of C		Registration Se Division of Co	
ĺ	P.O. Box 632	7	The Centre of	•
-	Tallahassee, I	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lexaire, LLC	
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited Liability Company were filed on	October 17, 2019 and assigned
lorida document number L19000261463	
his amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited liability company	here:
Cinzia F62, LLC	
he new name must be distinguishable and contain the words "Limited Liability Company," the	• - •
Enter new principal offices address, if applicable:	201
Principal office address MUST BE A STREET ADDRESS)	
	PK
Enter new mailing address, if applicable:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX	3 E
 If amending the registered agent and/or registered office address on our gent and/or the new registered office address here: 	records, enter the name of the new regi
Name of New Registered Agent:	
New Registered Office Address:	
Enter F	lorida street address
	. Florida

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.

Cuv

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Name	Address	Type of Action
			□ Add
			□Remove
			Change
		 	□ Add
			□Remove
			Change
			□ Add
			Remove
		· · · · · · · · · · · · · · · · · · ·	□Remove Change
			□ Add 7
		·	Петточе
			Change
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			Петоvе
			Change
			□Add
			□Remove
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of	of filing or more than 90 days after filing.) Pursuant to 605.020
ote: If the date inserted in this block does not meet the applicable standard of state's effective date on the Department of State's records.	atutory filing requirements, this date will not be listed at
·	
e record specifies a delayed effective date, but not an e	effective time, at 12:01 a.m. on the earlier o
The 90th day after the record is filed.	
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ated 2/18/20 Spm L. Stalia	epresentative of a member

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Filing Fee: \$25.00