

L200000 71343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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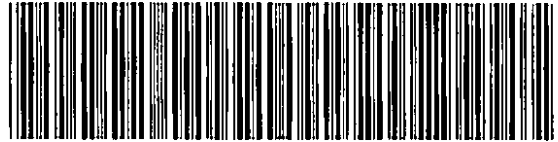
(Business Entity Name)

(Document Number)

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04/10/21 - 01005--010 **25.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LSI TRUST II, 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:

13 Madelin Diaz

Name of Person

56 Schweitzer-Ramras & Diaz, P.A.

Firm/Company

77 7975 NW 154th Street, Suite 340

Address

85 Miami Lakes, Florida 33016

City/State and Zip Code

94 madelin@schramrasdiazpa.com

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

For further information concerning this matter, please call:

Madelin Diaz 786 299-3947

Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

LSI TRUST II, 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 March 03/2020 and assigned
Florida document number L20000071343.

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

City

Florida

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Whereby 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	ROBERT A. BARO	7801 SW 90th Avenue	<input type="checkbox"/> Add
		Miami, Florida 33173	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mark Hernandez	975 Baptist Way	<input checked="" type="checkbox"/> Add
		Homestead, Florida	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Thomas J. Morgan, Jr.	55 Merrick Way	<input checked="" type="checkbox"/> Add
		Suite 404	<input type="checkbox"/> Remove
		Coral Gables, Florida 33134	<input type="checkbox"/> Change
MGR	Steven Sill	2621 Bulrush Lane	<input checked="" type="checkbox"/> Add
		Naples, Florida 34105	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

ii.

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Dated

Typed or printed name of signer