LZC UCC 394374

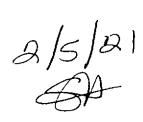
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

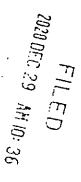




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· COVER LETTER

TO:

	egistration Se ivision of Cor				
eub iect	CASA VINCEINZO LLC				
SUBJECT	:	Name of Lim	ited Liability Company		
The enclos	ed Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please retu	rn all correspo	ndence concerning this matter	to the following:		
		ROBERT ERATO			
			Name of Person		
			Firm/Company		
1154 SE MONTEREY ROAD EXTENSION					
			Address		
		STUART, FL 34994			
		MASTERROCKI@MSN.C	City/State and Zip Code COM		
For further	information co	E-mail address: (to be used for future annual report noti	fication)	
ROBERT		oneering this maker, prease co	772 283-5558		
	Name of	f Person	at () Area Code Daytim	e Telephone Number	
Enclosed is	s a check for th	ne 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		Street Address: Registration Sec			
	ivision of C .O. Box 632	-	Division of Corporations The Centre of Tallahassee		
	allahassee. F			e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION GF

CASA VINCEINZO LLC		 -
(Name of the Limited Liability Coi (A Florida Limi	mpany as it now appears on our record ted Liability Company)	<u>is.</u>)
The Articles of Organization for this Limited Liability Comp.	any were filed on 12/17/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited l</u>	iability company here:	
CASA VINCENZO LLC		
The new name must be distinguishable and contain the words "Limited L	iability 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	1	20
		20 0
		: E 1
Enter new mailing address, if applicable:		
(Mailing address MAY BE.A-POST OFFICE BOX)		
and the second s		<u> </u>
and the second		36
B. If amending the registered agent and/or registered offi	ce address on our records, <u>enter</u>	the name of the new register
agent and/or the new registered office address here:		
N. C.V. B. C. LA		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		orida
	City	<i>Σιρ Code</i>
New Registered Agent's Signature, if changing Registered Ag		,
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my duties, a as provided for in Chapter 605,	nd I am familiar with and FS Or, if this document is
- · · · · ·		
, Ir c	Changing Registered Agent, Signature	of New Registered Agent

If amendin	g Authorized Person(s) authorized to m from our records:	anage, enter the title, name, and address o	f each person being added
MGR = N			
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			Change
			□Add
		/	□Remove
		/	□ Change 2020 ∴ DAdd C
			Remove
			Remove Change
			□Add
			□Remove
			Change
			□ Add
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			□Change
/			□Add
			□Remove
			□Change

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	ED AM 10:36
clive date, if other than the date of filing: effective date is listed, the date must be specific and cannot	(optional) to be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 are applicable statutory filing requirements, this date will not be listed a records.
cord specifies a delayed effective date, but not an eff filed.	ective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
DECEMBER 24 202	0
:0	 ·
DECEMBER 24 . 202	
	r or authorized representative of a member

Filing Fee: \$25.00