

7/14/2021

Division of Corporations

L21000241392

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : KATZ BASKIES & WOLF PLLC
Account Number : I2008000071
Phone : (561)910-5700
Fax Number : (561)910-5701

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: jeff.baskies@katzbaskies.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
410 VILLA DEL ORSO LLC

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2021 JUL 14 PM 1:21
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TALLAHASSEE, FLORIDA

Handwritten initials

COVER LETTER

H21000270533 3

**TO: Registration Section
Division of Corporations**

SUBJECT: 410 Villa Del Orso 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:

Jeffrey A. Baskies

Name of Person

Katz Baskies & Wolf PLLC

Firm/Company

3020 North Military Trail Suite 100

Address

Boca Raton, FL 33431

City/State and Zip Code

jeff.baskies@katzbaskies.com

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

For further information concerning this matter, please call:

Jeffrey A. Baskies

561 910-5700
at ()

Name of Person

Area Code

Daytime Telephone Number

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

H21000270533 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H21000270533 3

410 Villa Del Orso 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 May 21, 2021 and assigned Florida document number L21000241392

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

410 Via del Orso LLC

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)

FILED 2021 JUL 14 PM 1:21 SECRETARY OF STATE TALLAHASSEE FLORIDA

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:

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

H21000270533 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

H21000270533 3

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Change

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