

L2100017289

Florida Department of State
Division of Corporations
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Division of Corporations
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Email Address: karenplace444@gmail.com

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
2822 4TH AVE W LLC

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2023 APR 25 PM 12:30

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APR 27 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2822 4TH AVE W 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:

Rainier Altieri, Esq.

Name of Person

Najmy Thompson, P.L.

Firm/Company

1401 8th Ave W

Address

Bradenton, Florida 34205

City/State and Zip Code

karenplace444@gmail.com

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

For further information concerning this matter, please call:

Rainier Altieri, Esq.

941 748-2216

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,
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(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**

2822 4TH AVE W 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 11/03/2021 and assigned Florida document number L21000472849.

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:

391 Aruba Circle, Unit 102

(Principal office address MUST BE A STREET ADDRESS)

Bradenton, FL 34209

Enter new mailing address, if applicable:

391 Aruba Circle, Unit 102

(Mailing address MAY BE A POST OFFICE BOX)

Bradenton, FL 34209

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:

Karen Harilee

New Registered Office Address:

391 Aruba Circle, Unit 102

Enter Florida street address

Bradenton

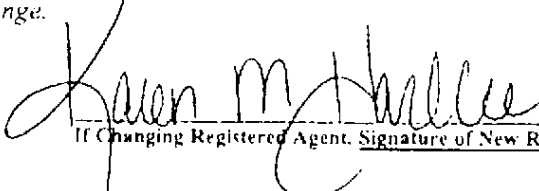
Florida 34209

City

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.


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>
MGR	Shawn T. Kaleta	P.O. Box 4099	<input type="checkbox"/> Add
		Anna Maria, FL 34216	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Karen Harlee	391 Aruba Circle, Unit 102	<input checked="" type="checkbox"/> Add
		Bradenton, FL 34209	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Multiple horizontal lines for amending information.

E. Effective date, if other than the date of filing: 4/21/2023 (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 April 21, 2023

Karen Harlee
Signature of a member or authorized representative of a member

Karen Harlee
Typed or printed name of signer