# 124000140051

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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(i)

# **COVER LETTER**

TO: Registration Section Division of Corporati	ons			
SUBJECT: Cortez	TOF COV	+ RentalS ed Liability Company	i, LLC	<del>_</del>
The enclosed Articles of Amen	dment and fee(s) are subm	itted for filing.		
Please return all correspondence	e concerning this matter to	the following:		
_	Demetr	Name of Person	, okolis	
_		Firm/Compалу		
		, -		
_	4317	126th St. 1 Address	<u> </u>	
_	Cort	City/State and Zip Code	34215	
		KOKOLIS@ O be used for future annual		
For further information concert	ning this matter, please cal	I:		
Dememous (	mike) Kokoli	Sat ( <u>Q41</u> )	448 - 72 Daytime Telep	273 hone Number
Enclosed is a check for the following	owing amount:			
S25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl		□ \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building



### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 22, 2024

DEMETRIOUS G KOKOLIS 4317 126TH ST W CORTEZ, FL 34215

SUBJECT: CORTEZ GOLF CART RENTALS LLC

Ref. Number: L24000140051

We have received your document for CORTEZ GOLF CART RENTALS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P23000033115.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Rebekah White Regulatory Specialist III

Letter Number: 424A00011181

1 2 2024

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cortez Col	of Cart Rentals LLO	<u> </u>	
(A Flor	pility Company as it now appears on our records.) rida Limited Liability Company)		
The Articles of Organization for this Limited Liability	y Company were filed on3 21  &	XOY_an	d assigned
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li		BruchR	entals of
A. If amending name, enter the new name of the n	Protole II C		Amilia
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC"	or the abbreviati	on "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		<del></del>
		5	<u>(D)</u>
		2024	4-
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		<u>. : ::::</u>	
		10	<del></del>
			•
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on our records, address here:	enter the-n	ame of the new
Togote a series and the series are the series and the series and the series are the series and the series and the series are the series are the series and the series are t			
Name of New Registered Agent:	સ	()	
Name of New Registered Agent.			
New Registered Office Address:	Enter Florida street address		
	Enter Provide Sirver Gauress		
		rida	Code
	City	Ζψ	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

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>	Address	Type of Action
			Add
			☐ Remove
			□ Add
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
			☐ Remove
			☐ Change
			Add
			☐ Remove
		<u> </u>	
			☐ Remove
			Change

	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
<del></del>	
f an effectiv <u>Note:</u> If th	date, if other than the date of filing:
ne record The 90	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
Dated	Ipril 19th . 2024.
	Signature of a member or authorized representative of a member
	Demetrios G. Kokolis  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00