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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

2366 E Mall Dr #406 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:

# **Annalisa Xioutas**

Name of Person

2366 E Mall Dr #406 LLC

Firm/Company

12437 Brantley Commons Ct

Address

Fort Myers, FL 33907

City/State and Zip Code

annalisa@ffi1.com

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

For further information concerning this matter, please call:

**Annalisa Xioutas** 

<sub>.,,</sub>239、671-3934

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

### 2366 E Mall Dr #406 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 Liabilit Florida document number <u>L13000090757</u>	ry Company were filed on June 24, 2013	and assigned	
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 end with the "L.L.C."	words "Limited Liability Company," the designation	n "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DDRESS)	\$ 12 \$ 12 \$ 12 \$ 12 \$ 12 \$ 12 \$ 12 \$ 12	
		Eng. To IT	
		100 No. 100	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or re- registered agent and/or the new registered office a		er the name of the new	
Name of New Registered Agent:		····	
New Registered Office Address:			
	Enter Florida street	address	
	, Florida		
	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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Karma Marino	1206 Logan Ln, Fort Myers, FL 33919	Add
·			Remove
MGRM	John Fontana	12437 Brantley Commons Ct, Fort Myers, FL 3390	7 🖌 Add
-			Remove
		SECRETARY OF STATE ANASSEE, FILORIDA	Adding Remove
			Add Remove
			Add
			Add Remove

II amending any other information, en	nter change(s) here: (Attach additional sheets, if necessary.)
•	
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August 30	
Mouto	
Annalisa Xioutas	of a member or authorized representative of a member
-	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

SECRETARY BE STATE