# L18000/38332

(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**

		stration Sec sion of Corp			•		
end in		SHANE M.	ABBENANTE, LLC				
SUBJEC	∪1: <sub>-</sub>	Name of Limited Liability Company					
The enclo	osed	Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn :	all correspor	ndence concerning this matter	to the following:			
			Sandra G. Abbenante				
			SHANE M. ABBENANTE,	Name of Person			
			1189 SW Balmoral Trace	Firm/Company	<del></del>		
			Stuart, FL 34997	Address			
			abbenantes@yahoo.com	City/State and Zip Code			
			E-mail address: (	to be used for future annual repo	ort notification)		
For furth	er inf	ormation co	ncerning this matter, please ca	all:			
Sandra	G. A	bbenante		772 919-2	742		
_		Name of	Person	Area Code	Daytime Telephone Number		
Enclosed	lisad	check for the	e following amount:				
\$25.0	00 Fil	ing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	□ \$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

### SHANE M. ABBENANTE, 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  $\frac{06/04/2018}{1}$ and assigned Florida document number L18000138332 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 "LLC," 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) 505 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 . Florida

### 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>	Name	Address	Type of Action
AMBR	Shane M. Abbenante	1189 SW Balmoral Trace, Stuart, FL 34997	
			■ Remove
			Change
MGR	Sandra G. Abbenante	1189 SW Balmoral Trace, Stuart, FL 34997	
			Remove
			■ Change
			Add
			Remove
		<del></del>	Change
			Add
			Remove
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E. Effective date, if other than the date of filing:	05.0207 (3)(h isted as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear b) The 90th day after the record is filed.	lier of:
Dated August 7, 2019	
Migne Allenant Signature of a member or authorized representative of a member	

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Typed or printed name of signee

Filing Fee: \$25.00