

L19000289945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

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(Business Entity Name)

(Document Number)

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2019 DEC 17 AM 8:09

DEC 17 2019

C Kinsey

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 8309 Pine River 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:

Mitchell Kitay

Name of Person

Firm/Company

8297 Emerald Winds Circle

Address

Boynon Beach, FL 33473

City/State and Zip Code

mitch.kitay@gmail.com

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

For further information concerning this matter, please call:

Mitchell Kilay    954        465-4613  
\_\_\_\_\_ 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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

8309 Pine River 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 November 22, 2019 and assigned  
Florida document number L19000289945.

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."

**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)**

**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

*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.*

**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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Lise L. Kitay	8297 Emerald Winds Circle	<input type="checkbox"/> Add
		Boynton Beach, FL 33473	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Mitchell R. Kitay	8297 Emerald Winds Circle	<input checked="" type="checkbox"/> Add
		Boynton Beach, FL 33473	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

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.

Useful  
Signature of a member or authorized representative of a member

Lise Kitay

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Typed or printed name of signee