Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NAJMY THOMPSON, P.L.

Account Number : I20090000014 : (941)907-3999 Phone Fax Number : (941)840-5559

\*\*Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please.\*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 3015 AVE E LLC

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## **COVER LETTER**

Division of Cor				
3015 AVE				
SUBJECT:	Name of Lim	ited Liability Company		
		1. 10. 50:		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondence	endence concerning this matter	to the following:		2021 JUL 27 PK 2: 04
	Scan Kelly			
		Name of Person		21
	Najmy Thompson, P.L.			2
		Firm/Company		. 55
	1401 8th Ave W			=
		Address		
	Bradenton, Fl. 34205			
		City/State and Zip Code		
	Cara@beachtobayliving.co			
	E-mail address: (	to be used for future annual report notifi	cation)	
For further information of	oncerning this matter, please o	all:		
Deividas Gizys		941 7482216 at ( )		
Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed is a check for the	he following amount:			
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	of Status &
Mailing Address Registration		<u>Street Address:</u> Registration Sec	tion	
Division of C		Division of Corp		
P.O. Box 632		The Centre of Ta	allahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3015 AVE E LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our record ited Liability Company)	<u>(s.</u> )
The Articles of Organization for this Limited Liability Comp Florida document number <u>L19000045925</u>	pany were filed on 02/14/2019	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 contain the words "Limited	Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u>s)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>enter</u>	the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	in a second
	, FI	lorida
	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>	Address	Type of Action
MGR	Roman Eckert	1401 8th Ave W	≣Add
		Bradenton, F1. 34205	□Remove
			□Change
<del></del>			□Add
			□Remove
			□Remove
			□Change
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Tective date, if other than to an effective date is listed, the date of ote: If the date inserted in this ocument's effective date on the	nust be specific : block does no	and cannot be pri of meet the appl	or to date of filin icable statutory	g or more than 90 filing requires	option (option) days after finents, this c	ling.) Purs	uant to 60 tot be lis	5.020 t <b>c</b> d a:
record specifies a delayed effectis filed.	tive date, but i	not an effective	time, at 12:01	a.m. on the ear	lier of: (b)	The 90tl	n day afte	er the
		2021						
July 27		_ ,	<del></del> ·					
July 27			·					

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