

L220000088362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

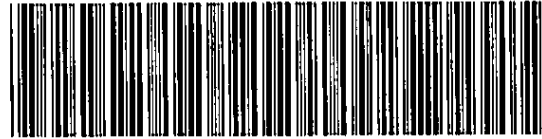
(Business Entity Name)

(Document Number)

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2022 SEP -2 PM 2:08  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED



502 W Main Street  
PO Box 1748  
Wauchula, Florida 33873  
863.773.4449  
... 863.773.0223

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August 31, 2022

Division of Corporations  
Attn: Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: *5692 NE McIntyre Street, LLC***

Dear Sirs:

Enclosed please find Articles of Amendment and Check No. 3772 in the amount of \$25.00 for the filing fee.

Sincerely,

Ashley A. Daniels  
Assistant to J. Steven Southwell, II

enclosures as stated herein

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 5692 NE MCINTYRE STREET, 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:

Steven Southwell

Name of Person

J. Steven Southwell, PA

Firm/Company

PO Box 1748

Address

Wauchula, Florida 33873

City/State and Zip Code

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

For further information concerning this matter, please call:

Steven Southwell 863 773-4449  
Name of Person at ( ) 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

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SECRETARY OF STATE  
TALLAHASSEE, FL

**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>                      |
|--------------|-------------------------|-------------------------------|--|
| MGR          | Winston Management, LLC | 7901 4th Street N., Suite 300 | <input type="checkbox"/> Add               |
|              |                         | St. Peteresburg, FL 33702     | <input checked="" type="checkbox"/> Remove |
|              |                         |                               | <input type="checkbox"/> Change            |
| AMBR         | Mark Pajak              | 320 Stallion Square NE        | <input checked="" type="checkbox"/> Add    |
|              |                         | Leesburg, VA 20176            | <input type="checkbox"/> Remove            |
|              |                         |                               | <input type="checkbox"/> Change            |
| AMBR         | Steve Kotter            | 5411 8th Avenue Drive W       | <input checked="" type="checkbox"/> Add    |
|              |                         | Bradenton, FL 34209           | <input type="checkbox"/> Remove            |
|              |                         |                               | <input type="checkbox"/> Change            |
|              |                         |                               | <input type="checkbox"/> Add               |
|              |                         |                               | <input type="checkbox"/> Remove            |
|              |                         |                               | <input type="checkbox"/> Change            |
|              |                         |                               | <input type="checkbox"/> Add               |
|              |                         |                               | <input type="checkbox"/> Remove            |
|              |                         |                               | <input type="checkbox"/> Change            |
|              |                         |                               | <input type="checkbox"/> Add               |
|              |                         |                               | <input type="checkbox"/> Remove            |
|              |                         |                               | <input type="checkbox"/> Change            |

This image shows a single sheet of white paper with horizontal blue or grey ruling lines, typical of notebook paper. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
 Note: If the date inserted in this block is the date of filing, the date of filing must be the date of filing.

If 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.

Dated AUGUST 30<sup>TH</sup> 2022

Signature of a member or authorized representative of a member

Mark Pajak

Typed or printed name of signee

**Filing Fee: \$25.00**