## 422000088362

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SECRETARY OF STATE
TALLAHASSEE, FL



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

··· 863.773.0223

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. Dániels

Assistant to J. Steven Southwell, II

enclosures as stated herein

## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

oorations				
CINTYRE STREET, LLC				
Name of Limi	led Liability Company			
Amendment and fee(s) are subr	nitted for filing.			
ndence concerning this matter t	o the following:			
Steven Southwell				
	Name of Person			
J. Steven Southwell, PA				
	Firm/Company	<del></del>		
PO Box 1748				
	Address		2022 SEC	
Wauchula, Florida 33873			ALL SEP	
	City/State and Zip Code		ARY AHAS	TITU
E-mail address: ()	o be used for future annual report notific	cation)	OF S SEE	
oncerning this matter, please ca	il:		FA 8	
	863 773-4449		т	
f Person	Area Code Daytime	Telephone Number		
ne following amount:				
☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of S Certified Copy	datus &	
ss: Section				
Corporations 27	,			
	Name of Limit Amendment and fee(s) are subrandence concerning this matter to Steven Southwell  J. Steven Southwell, PA  PO Box 1748  Wauchula, Florida 33873  E-mail address: (to oncerning this matter, please or oncerning this matter, please or oncerning this matter of Status  Section Corporations	Amendment and feets) are submitted for filing.  Amendment and feets) are submitted for filing.  Indence 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 oncerning this matter, please call:  Area Code  TPerson  at (	Amendment and fee(s) are submitted for filing.  Indence 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)  oncerning this matter, please call:  Area Code  TPerson  at (	Amendment and fee(s) are submitted for filing.  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)  oncerning this matter, please call:  Thereon  at (863 773-4449 773-4449  Area Code Daytine Telephone Number  at Gollowing amount:  S50.00 Filing Fee & Certificate of Status  Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)  Si:  Street Address:  Section  Registration Section  Division of Corporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5692 NE MCINTYRE STREET, LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on January 19, 2022	and assigned
Florida document number L22000088362		
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	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>(S)</u>	
		<del>.</del>
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 the i</u>	name of the new register
Name of New Registered Agent:	<del>-</del>	
New Registered Office Address:	Enter Florida street address	
	imer viorida street address	
	Florida	A
	City	zip coae

## 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 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>	Type of Action
MGR	Winston Management, LLC	7901 4th Street N., Suite 300	□Add
		St. Peteresburg, FL 33702	■Remove
			□Change
AMBR	Mark Pajak	320 Stallion Square NE	<b>≣</b> Add
		Leesburg, VA 20176	□Remove
			□ Change
AMBR Steve Kotter	5411 8th Avenue Drive W	≣Add	
		Bradenton, FL 34209	□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

an ei Vote:	tive date, if other than the date of filing:
	ad annual Connection of the Co
reco Lis f	rd 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 iled.
1 15 [	Airca - 120 Th
1 15 1	AUGUST 30.Th. 2022
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Filing Fee: \$25.00