

L00000009893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS
2013 JAN 31 AM 11:19

C. LEWIS
FEB - 1 2013
EXAMINER



The Law Office of STEVEN J. BRACCI, PA
A Professional Association

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January ²⁹~~30~~, 2013

VIA FEDERAL EXPRESS

Attn: Amendments
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Bayside Office Center, LLC (Doc. # L00000009893)
Amendment for Name Change and
Simultaneous Reinstatement

Dear Madam or Sir:

I represent Bayside Office Center, LLC, an administratively dissolved Florida limited liability company. The company would like to be reinstated, but the name "Bayside Office Center, LLC" is now taken by another company.

I spoke to your department several days ago, and was instructed that the proper procedure is to simultaneously mail to you an Amendment for Name Change, and a Reinstatement, together with the applicable fees. Accordingly, enclosed are the following:

1. Amendment for Name Change.
2. \$25.00 check payable to "Department of State" for Name Change.
3. Reinstatement.
4. \$1,076.25 check payable to "Department of State" for Reinstatement and Certificate of Status (\$1,071.25 for reinstatement; \$5.00 for Certificate of Status)

Kindly process both the Name Change and the Reinstatement, and provide me with a Certificate of Status.

If you have any questions or require anything further, please contact me.

Thank you,

Steven J. Bracci, Esq.

Steven J. Bracci, PA

Encl.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bayside Office Center, LLC (L00000009893)
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 J. Bracci, Esq.

Name of Person

Steven J. Bracci, PA

Firm/Company

2590 Northbrooke Plaza Drive #208

Address

Naples, FL 34119

City/State and Zip Code

steve@braccilaw.com

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

For further information concerning this matter, please call:

Steven J. Bracci, Esq.

Name of Person

at (239) 596-2635

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2013 JAN 31 AM 11:20

Bayside Office Center, 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 8/14/2000 and assigned
Florida document number L00000009893.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Naples Bayside Office Center, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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: Anthony F. LaPorta

New Registered Office Address: 955 Gulf Shore Blvd N

Enter Florida street address

Naples, Florida 34102

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

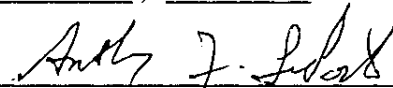
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2013 JAN 31 AM 11:20

Dated JAN 29, 2013



Signature of a member or authorized representative of a member

Anthony F. LaPorta

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00