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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Div	ision of Cor	porations		*	
SUBJECT:	Sheltair Du	ınn, L.L.C		هو در دوه در موړ د د	•
		Name of Lin	nited Liability Company		
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following:		
		Dena Auletto			
			Name of Person		
		Saavedra-Goodwin			
			Firm/Company		
		312 S.E. 17th Street, 2nd I	Floor		
		<u> </u>	Address		Fec. Status &
		Fort Lauderdale, FL 33310	,		
			City/State and Zip Code	<u> </u>	
		dauletto@saavlaw.com	Name of Limited Liability Company ent and feets) are submitted for filing, encerning this matter to the following: Auletto Name of Person dra-Goodwin Firm/Company E. 17th Street, 2nd Floor Address auderdale, FL 33316 City/State and Zip Code o@saavlaw.com E-mail address: (to be used for future annual report notification) this matter, please call: at (954) 767-6333 Area Code Daytime Telephone Number g amount: 00 Filing Fee & Certified Copy tadditional copy is enclosed) Street Address: Registration Section		
			•	otification)	
For further in	formation c	oncerning this matter, please c	all:		
Dena Auleuo	•				
_	Name o	Person		ime Telephone Number	
Enclosed is a	check for th	e following amount:			
■ \$25.00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Sta Certified Copy	uus &
	ing Address		Street Address:		
	istration S				
Div	ision at Ca	ornorations	Division of C	~ ~ ~ ~ ~ ~	

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

Sheltair Dunn, LLC		. 37
(Name of the Limited Liab) (A Florid	lity Company as it now appears on our records. da Limited Liability Company)	TI I
The Articles of Organization for this Limited Liability	Company were filed on 11/27/2001	Trand actigned
Florida document number L01000020353		
This amendment is submitted to amend the following:		1:0
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "LEC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
		<u> </u>
Catanana madina adda a if a di 11		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	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>	Type of Action
COO/S	Warren D. Kroeppel	4860 N.E. 12th Avenue	🗆 Add
		Fort Lauderdale, FL 33334	≣Remove
			□Change
			□ Add
			□Remove
			□Change
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		-	
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		 	□Add
			□Remove

		
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days a Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of ecord is filed. Dated Dated Signature of a member or authorized representative of a member		
an effectiv <u>ote:</u> If t	re 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 605.03 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed	207 l as '
ecord sp	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after to	he
ated	august 5 2020	
	Signature of a member or authorized representative of a member	
	CCrald M. Holland, CEo Typed or printed name of signee	

Filing Fee: \$25.00