

L040000089016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

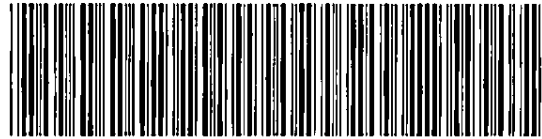
(Business Entity Name)

(Document Number)

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09/19/23--01022--017 \*\*30.00

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2023 SEP 19 PM 5:59  
CLERK OF SUPERIOR COURT  
JULIA L. LEE

VH

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

Fitzgerald & Ford, 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:

Giovanna Koo

Name of Person

Palmi, Inc

Firm/Company

290 SE 2nd Avenue

Address

Delray Beach, FL 33444

City/State and Zip Code

giovanna@palmi.net

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

For further information concerning this matter, please call:

Giovanna Koo

Name of Person

at (561)

Area Code

906-4644

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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Fitzgerald & Ford, 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 12/09/2004 and assigned  
Florida document number L04000089016

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 abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

290 SE 2nd Avenue  
Delray Beach, FL 33444

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

(same above)

**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:

Giovanna Koo

New Registered Office Address:

290 SE 2nd Avenue

Enter Florida street address

Delray Beach

Florida

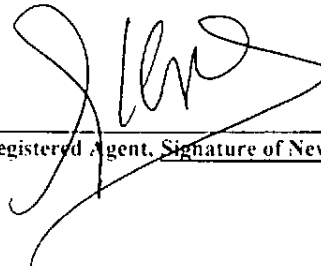
33444

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

**MGR = Manager**  
**AMBR = Authorized Member**

[illegible]

2023 SEP 19 PM 5:59  
CLARK COUNTY  
CLARK COUNTY

2023 SEP 19 PM 5:59

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(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)

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 September 15, 2023 MS

Signature of a member or authorized representative of a member

Mark M Ford

Typed or printed name of signee