

L05000015801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

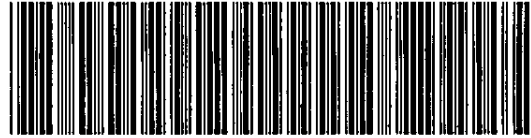
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER

APR 27



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2016 APR 25 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 14, 2016

SCAPEROTTA REAL ESTATE, LLC
JOSEPH V SCAPEROTTA
309 RICHARD JACKSON BLVD, STE. 200
PANAMA CITY BEACH, FL 32407

SUBJECT: SCAPEROTTA REAL ESTATE, LLC
Ref. Number: L05000015801

We have received your document for SCAPEROTTA REAL ESTATE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P15000068456 "GULF AMERICAN INC.".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 816A00007700



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TALLAHASSEE, FLORIDA

April 20, 2016

Florida Division of Corporations
Attn: Doc Examiner Karen Saley
P.O. Box 6327
Tallahassee, FL 32314

Dear Karen:

We are the owner of Gulf American, Inc., Document Number P15000068456. We are releasing the name for use for Gulf American, LLC.

Best Regards,

A handwritten signature in black ink, appearing to read "Joseph Scaperotta", with a long horizontal line extending to the right.

Joseph Scaperotta
Registered Agent

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Scaperotta Real Estate, 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:

Joseph V. Scaperotta

Name of Person

Gulf American, LLC

Firm/Company

309 Richard Jackson Blvd, Suite 200

Address

Panama City Beach, FL 32407

City/State and Zip Code

scaprel@gmail.com

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

For further information concerning this matter, please call:

Joe Scaperotta

850

866-5696

at (_____) _____

Name of Person

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**

Scaperotta Real Estate, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on February 15, 2005 and assigned
Florida document number L05000015801.

This amendment is submitted to amend the following:

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

Gulf American, LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 19215

Panama City Beach, FL 32417

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

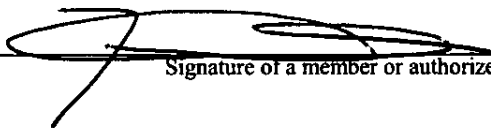
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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:

(b) The 90th day after the record is filed.

Dated April 5, 2016.



Signature of a member or authorized representative of a member

Joseph Scaperotta

Typed or printed name of signee