105000018525

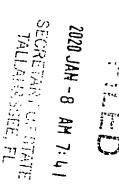
(Red	questor's Name)	
(Add	iress)	
(Add	dress)	
(Cit)	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Que	iness Entity Nar	
(Bus	siness Entity Nar	nej
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



600338713486

01/08/30--01021--004 ++30.00



O SIMMONS FEB 0 5 2020

Thomas Wanderon 28089 Vanderbilt Drive, Suite 201 Bonita Springs, FL 34134 (239) 405-8395 (239)405-8544 Fax

www.wondertax.com

Tuesday, January 7, 2020

TO: Division of Corporations

RE: Thomas Wanderon LLC

Document #: L05000018525

Vanderbilt 102, LLC

Document #: L20000001167

To whom it may concern:

I am the sole owner of Thomas Wanderon LLC.

I am the managing member of Vanderbilt 102, LLC.

Both of these Florida LLC's are mine and I wish to release the names so that they can be switched.

I am enclosing amendment documents to change Thomas Wanderon, LLC to the name of Vanderbilt 102, LLC – and adding additional members to this LLC.

I am enclosing amendment documents to change Vanderbilt 102, LLC name to Thomas Wanderon, L.L.C., and also removing members from this LLC.

Please use this letter as my authorization to release the names.

Very truly yours,

Thomas Wanderon

COVER LETTER

	Registration Division of C	i Section Corporations		·	
		AS WANDERON, L.L.C.			
SUBJEC	.1;	Name of Lim	ited Liability Company	•	
The encl	osed Articles	s of Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all corre	espondence concerning this matter	to the following:		
		LISA ZAHORIAN			
			Name of Person		
		TAX & FINANCIAL STR	RATEGISTS LLC		
		;·	Firm/Company		
		28089 VANDERBILT DR	a., SUITE 201		
			Address		
		BONITA SPRINGS, FL 3	4134		
			City/State and Zip Code		
		LISA@WONDERTAX.CO	OM to be used for future annual	man natification	<u> </u>
Constant				терот пописан)ii)
		on concerning this matter, please c			
LISA Z	AHORIAN		239 405-8395 at ()		
	Nar	ne of Person	Area Code ,	Daytime Tele	ephone Number
Enclosed	d is a check f	or the following amount:			
□ \$25.	.00 Filing Fed	e \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is end		□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	_	dress: on Section of Corporations	•	ddress: ation Section n of Corpora	
	P.O. Box			ntre of Talla	

Tallahassee, Fl. 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THOMAS WANDERON, L.L.C.		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our record d Liability Company)	ds.)
The Articles of Organization for this Limited Liability Compar	ny were filed on 02/23/2005	and assigned
Florida document number L05000018525		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
VANDERBILT 102, LLC		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC	
Enter new principal offices address, if applicable:	 .	2020 SECT
(Principal office address MUST BE A STREET ADDRESS)		JAN TANK
		The state of the s
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered offic	e address on our records, <u>enter</u>	the name of the new registere
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	555
	. F i	lorida
	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>	Address	Type of Action
AMBR	LISA ZAHORIAN	1471 ALHAMBRA DR. FORT MYERS FL 33901	🗏 Add
			□Remove
			_ □Change
AMBR	LYN SCHANTZ	27245 GALLEON DR BONITA SPRINGS FL 3413	5 ■Add
		TALL	- 22 -
AMBR SAMMY S	SAMMY SUE WILSON	1423 ARGYLE DR FT MYERS, FL 33901	20 -8 I
			Change
AMBR	ROBERT S DONOVAN	1423 ARGYLE DR FT MYERS, FL 33901	= Add
			□Remove
			□Change
AMBR BRIAN YOUNGS	BRIAN YOUNGS	535 IBIS WAY, NAPLES, FL 34110	= Add
		<u>;</u> , . · ·	□Remove
			🗆 Change
			□Add
			□Remove
		· •	□ Change

								_
				-				_
	·							-
					<u> </u>			_
	••••							-
								_
								_
					_			
					_	HO HO	1020	_
 					•		A	- ****
						<u>事</u> 等	8	امار بدن موجوعا موجوعا
			 -			<u>第二</u> 富元	3	_ (1)
	_					in or	-1	_
							<u> </u>	_
								_
		 -						
								_
	···				·			_
Effective date, if other than the o	tate of filin	ıg:			(optior	nal)		
(If an effective date is listed, the date must Note: If the date inserted in this blo	be specific an	d cannot be prio	r to date of filing	g or more than 90 filing requirer	days after fi	ling.) Purs	uant to 60 not be lis)5.0207 sted as 1
document's effective date on the De	partment of	State's records	i.	•				
	1. 1.		3 12.01		lio- of the	Th.: 00t	h day aft	ar tha
he record specifies a delayed effective ord is filed.	date, but no	it an effective i	ime, at 12:01	a.m. on the car	ner or, (o)	THE 700	n day an	er uic
JANUARY 7TH		2020						
Dated								
//	/_							
	Signature of a	member or auti	orized represer	tative of a mem	er			

Filing Fee: \$25.00