

L05000042403

12/11

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

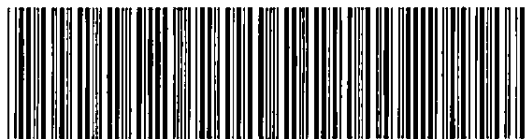
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200437460052

10/03/24--01014--004 \*\*25.00

200437460052  
Filing Office  
10/03/24

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 203 West 14th Street Limited Liability Company  
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:

Name of Person
Salter Feiber, P.A.
Firm/Company
3940 N.W. 16th Blvd, Bldg. B
Address
Gainesville, FL 32605
City/State and Zip Code
stars@salterlaw.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Star M. Sansone at (352) 376-8201

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 Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

# Salter • Feiber

ATTORNEYS AT LAW

STAR M. SANSONE

L.L.M in Taxation

stars@salterlaw.net

September 30, 2024


Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Articles of Amendment to the Articles of Organization of 203 West 14th Street LLC

Dear Sir or Madam:

Enclosed please find the Articles of Amendment to the Articles of Organization of the above mentioned entity, along with our firm check in the amount of \$25.00 for the filing fees. Once filed, please forward the documents to our office.

Sincerely,



Prepared by Jordan Gompers, Legal Assistant to  
Attorney, Star M. Sansone

SMS:jg

**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>
MGRP	Rachel L. Richter	5218 N. 44th Street	<input type="checkbox"/> Add
		Tacoma, WA 98407	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
P	Rebecca Richter LeBaron	8484 Stoneridge Terrace	<input type="checkbox"/> Add
		Boulder, CO 80302	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

(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 16, 2024.

Rebecca Rachel LeBaron  
Signature of a member or authorized representative of a member

Rebecca Richter LeBaron

Typed or printed name of signee

**Filing Fee: \$25.00**