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## **COVER LETTER**

TO: Registration Division of C					
Giuliano/	Minorea F-901, LLC				
	Name of Lin	Name of Limited Liability Company			
The enclosed Articles o	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	Michael J. Merrill. Esq.				
		Name of Person			
	Cole, Scott & Kissane, P.A	١.			
		Firm/Company			
	Tower Place, Suite 400, 19	00 Summit Tower Boulevard		100 Te	
		Address	<del></del>	25 S	$\neg$
	Orlando, FL 32810			NGV 26 JETAKI AHASSE	FILED
	michael.merrill@csklegal.c	City/State and Zip Code om	·	AN 7: 55 SE STATE SE FLORIDA	Ö
	E-mail address: (	to be used for future annual report notif	ication)	1: 55 1: 55 1: 55	
For further information	concerning this matter, please ca	all:		<b>,</b>	
Michael J. Merrill, Esq	l.	321 972-0022 at ( )			
Name	of Person		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 Certificate of Certified Co (additional cop	of Status &	

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

Giuliano/Minorca F-901, 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 May 13, 2005 and assigned Florida document number \_ L05000048172 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 "LLC." 265 Minorca Beach Way 901 Enter new principal offices address, if applicable: New Smyrna Beach, FL 32169 (Principal office address MUST BE A STREET ADDRESS) 1648 Via Tuscany Enter new mailing address, if applicable: Winter Park, FL 32789 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the rame of the new registered agent and/or the new registered office address here: Concetta Giuliano Name of New Registered Agent: 1648 Via Tuscany New Registered Office Address: Enter Florida street address Florida 32789
Zip Code Winter Park

#### 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.

City

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
MGRM	Vincenzo Giuliano	5703 Red Bug Lake Road, PMB-102	
		Winter Springs, FL 32708	
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ective date, if other than the effective date is listed, the date must	be specific and cannot be	prior to date of filing	or more than 90 days af	<b>tional)</b> ter filing.) Pursuant	to 605.0.
e: If the date inserted in this blo ument's effective date on the De			filing requirements, t	his date will not	be listed
record specifies a delayed he 90th day after the reco		it not an effecti	ve time, at 12:01	a.m. on the	earlier
ed November 19	2018	·			
, <del>, ,</del>					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00