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COVER LETTER

Registration Section Division of Corporations

TO:

CLUBICO	Development, LLC					
NOBJECT.	Name of Lin	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Janos Guoth					
		Name of Person				
	Marshall Development,	LLC				
	Firm Company 1016 Thomas Drive #104					
	Address					
	Panama City, FL 32408					
		City/State and Zip Code	.			
	jguoth@live.com					
	E-mail address: (to be used for future annual report no	tification)			
For further information c	oncerning this matter, please c	all:				
anos Guoth		318 4509428 at ()				
Name of Person		at () Area Code Dayti	me Telephone Number			
Enclosed is a check for t	he 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:		Street Address:	antian			
Registration 9 Division of C		Registration S Division of Co				
P.O. Box 632	•	The Centre of	- ·			
Tallahassee, FL 32314		2415 N. Monr	oe Street, Suite 810			

Tallahassee, FL 32303

. ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Li		* * * 3 .		
(74.1.1)	ability Company a forida Limited Liabi	sit now appears one ity Company)	our records:): 12: 1, 1,	
The Articles of Organization for this Limited Liabili Florida document number L05000072676	ity Company wer	e filed on <u>07/24/2</u>	005	_ and assigned
This amendment is submitted to amend the following	g:			
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 (ompany," the designa	ntion "LEC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	; _			
(Principal office address MUST BE A STREET AL	DDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>-</u> -		<u> </u>	
B. If amending the registered agent and/or regist agent and/or the new registered office address he		ess on our record	ls, <u>enter the name o</u>	f the new register
Name of New Registered Agent:				
Name of New Registered Agent:				
		Enter Florida st	eet address	
Name of New Registered Agent:			reet address Florida	
Name of New Registered Agent:		Enter Florida st.		Zip Code

If Changing Registered Agent, Signature of New Registered Agent

	h, Janos title of MR should be changed to AUTHORIZED MEMBER
Guot	h, Pamela title of MRS should be changed to AUTHORIZED MEMBER
-	
	
	ate, if other than the date of filing: (optional)
<u>e:</u> If the	e 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 605,020 to date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
iment s	effective date on the Department of State's records.
ord spe filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
	5/2020
03/0 ed	·
03/0 ed	Signature of a member or authorized representative of a member