

L06000026425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

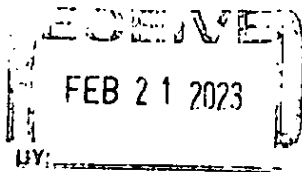
☐ MAIL

(Business Entity Name)

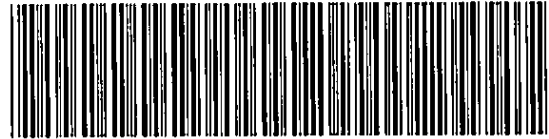
(Document Number)

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200401244382

FEB 21 2023

LLC 2410 --01004--001 \*\*275.00

LLC Amend

2023 FEB 21 AM 8:04  
SECRETARY OF STATE  
CLERK OF SUPERIOR COURT

FILED

A. RAMSEY

APR 20 2023

Real Estate Law  
Title Insurance  
Business Law  
Estate Planning  
Probate  
Trust Administration



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February 17, 2023

File #5327

**SENT VIA FEDEX**

Florida Department of State  
Registration Section  
Division of Corporations  
PO box 6327  
Tallahassee FL 32314

RE: Articles of Amendment to Articles of Organization on 5 Entities (See Below)

To Whom It May Concern:

Enclosed please find the following documents for filing Articles of Amendment for 5 entities:

1. Our firm's check #4823 in the amount of \$275.00 as payment for the \$55 each filing fees.
2. Articles of Amendment to Articles of Organization for: **Eden Industrial, LLC.**
3. Articles of Amendment to Articles of Organization for: **Bench Industrial LLC.**
4. Articles of Amendment to Articles of Organization for: **Gulfview Industrial, LLC.**
5. Articles of Amendment to Articles of Organization for: **Denton Industrial, LLC.**
6. Articles of Amendment to Articles of Organization for: **Bench Industrial 2, LLC.**

If you have any questions, please do not hesitate to contact our office.

Sincerely,

STROSS LAW FIRM, P.A.

A handwritten signature in cursive script that reads "Krysla Ferrell".

Krysla Ferrell  
Clerk

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EDEN INDUSTRIAL, 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:

GEORGIANN D. PERRY

Name of Person

Firm/Company

3310 SAN JOSE STREET

Address

CLEARWATER, FL 33759

City/State and Zip Code

TOGEORGE PERRY@MSN.COM

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

For further information concerning this matter, please call:

GEORGIANN D. PERRY

727 410-4922  
at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

RECEIVED

FEB 21 2000

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

EDEN INDUSTRIAL, LLC

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

**2023 FEB 21 AM 8:05**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
and assigned

The Articles of Organization for this Limited Liability Company were filed on MARCH 13, 2006  
Florida document number 1.06000026425

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 "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) \_\_\_\_\_

**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>
MGRM	ORCHID LAKE TRAVEL TRAILER PARK	3310 SAN JOSE STREET	<input type="checkbox"/> Add
		CLEARWATER, FL 33759	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GEORGIANN D. PERRY	3310 SAN JOSE STREET	<input checked="" type="checkbox"/> Add
		CLEARWATER, FL 33759	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	KENNETH K. DONOVAN, JR.	7125 ORCHID ISLAND PLACE	<input checked="" type="checkbox"/> Add
		BRADENTON, FL 34202	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JAMES H. DONOVAN	7114 PORPOISE STREET	<input checked="" type="checkbox"/> Add
		WEEKI WACHEE, FL 34607	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

**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.

Dated February 15, 2023

Signature of a member of the \_\_\_\_\_  
GEORGIANN D. PERRY

Signature of a member or authorized representative of a member

GEORGIANN D. PERRY

Typed or printed name of signee

**Filing Fee: \$25.00**