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FILED
2022 JUN -3 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FL



VINCENT FRANTZ
vincent.frantz@chengcohen.com
P|312.548.0593
F|312.277.3961

June 2, 2022

VIA FEDERAL EXPRESS

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

Re: Amendment to Articles of Organization for Paradise Family, LLC and Another Day in
Paradise Boat Club, LLC

Dear Sir or Madam,

I have enclosed Articles of Amendment to Articles of Organization for Paradise Family, LLC and Another Day in Paradise Boat Club, LLC. I have also enclosed a check in the amount of \$50.00 to cover the filing fee for both entities.

Please send the acknowledgment of receipt to the following address:

Cheng Cohen LLC
c/o Vincent Frantz
363 W. Erie Street, Suite 500
Chicago, IL 60654

Should you have any questions, please do not hesitate to contact me.

Very truly yours,

CHENG COHEN LLC

A handwritten signature in black ink, appearing to read "V. Frantz".
Vincent M. Frantz

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Another Day in Paradise Boat Club, 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:

Vincent Frantz
Name of Person
Cheng Cohen LLC
Firm/Company
363 W. Erie Street, Suite 500
Address
Chicago, IL 60654
City/State and Zip Code
corporate@chengcohen.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vincent Frantz
Name of Person
312 548-0593
at ()
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

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

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

FILED

2022 JUN -3 AM 9:43

Another Day in Paradise Boat Club, LLC

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

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on December 13, 2006 and assigned
Florida document number 1.06000118841.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

897 East Venice Avenue

(Principal office address MUST BE A STREET ADDRESS)

Venice, FL 34285

Enter new mailing address, if applicable:

N/A

(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:

N/A

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>
MGR	Glenn Bergoffen	150 Rainville Road	<input type="checkbox"/> Add
		Tarpon Springs, FL 34689	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Leah Bergoffen	150 Rainville Road	<input type="checkbox"/> Add
		Tarpon Springs, FL 34689	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Paradise Family, LLC	897 East Venice Avenue	<input checked="" type="checkbox"/> Add
		Venice, FL 34285	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

The limited liability company shall now be a member-managed entity.

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CLERK OF STATE
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: May 9, 2022 (optional)

(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)

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.

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 June 2, 2022

Julianne Foran

Signature of a member or authorized representative of a member

SIGNATURE: PARADISE FAMILY, LLC BY JULIANNE FORAN, ASSISTANT SECRETARY
Typed or printed name of signee

Filing Fee: \$25.00