

LO7000066324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

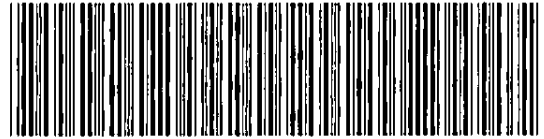
(Business Entity Name)

(Document Number)

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ALLAHSTED, Lulu

R. HUNT
08/12/24

ESTATE
RE: FL

AUG 11

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

COLLINS 73RD INVESTMENT GROUP, L.L.C.

Please Debit FCA000000003 For: 30

Thank you Seth Neeley



- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COLLINS 73RD INVESTMENT GROUP, L.L.C.

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:

Matthew Holtz, Esquire

Name of Person

Haber Law, LLP

Firm/Company

251 NW 23rd Street

Address

Miami, FL 33127

City/State and Zip Code

lvergara@haber.law

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

For further information concerning this matter, please call:

Lori Vergara

305 379-2400
at ()

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

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

COLLINS 73RD INVESTMENT GROUP, L.L.C.

(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 June 25, 2007 and assigned
Florida document number L07000066324.

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>
MGR	Ruben Seoanes	8572 Maggione Court	<input type="checkbox"/> Add
		Naples, FL 34114	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Oscar Sklar	1019 Kane Concourse	<input type="checkbox"/> Add
		Suite 200	<input type="checkbox"/> Remove
	Oscar Sklar and Ana Sklar, Co-Trustees of the Ana Sklar Living Trust, dated December 29, 2009	Bay Harbor Islands, FL 33154	<input checked="" type="checkbox"/> Change
AMBR		1019 Kane Concourse	<input checked="" type="checkbox"/> Add
		Suite 200	<input type="checkbox"/> Remove
		Bay Harbor Islands, FL 33154	<input type="checkbox"/> Change
AMBR	EM Family Holdings LP	9350 West Bay Harbor Drive	<input type="checkbox"/> Add
		#6C	<input type="checkbox"/> Remove
		Bay Harbor Islands, FL 33154	<input checked="" type="checkbox"/> Change
AMBR	Lord & Sons, Inc.	1019 Kane Concourse	<input type="checkbox"/> Add
		#202F	<input type="checkbox"/> Remove
		Bay Harbor Islands, FL 33154	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILE
APR 9: 11

12/11/2011 11:09 AM
12/11/2011 11:09 AM

(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)

Filing Fee: \$25.00