

LD7000070347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

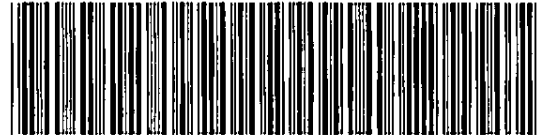
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Received Faxed Correction from  
Annette W. on 4/23/2019 to  
change Entity name.

SR

Office Use Only



600327221956 ✓

04/06/19--01015--030 \*\*25.00

S TALLENT  
APR 23 2019

FILED  
2019 APR 23 PM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FL

MC



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 16, 2019

ANNETTE WHITNEY  
ZENITH LLC  
513 U.S. HWY 1, STE. 111  
NORTH PALM BEACH, FL 33408

SUBJECT: CROTON PARK LLC  
Ref. Number: L07000070347

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

THE DOCUMENT NUMBER OF THE NAME CONFLICT IS P99000022287.

ON PAGE 3 OF 3, THE DOCUMENT MUST BE DATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 819A00007669

4/23/19

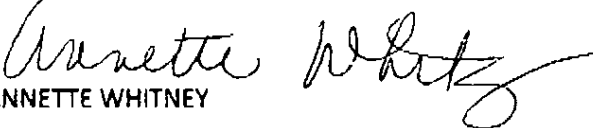
FROM: ANNETTE WHITNEY  
CROTON PARK LLC  
L07000070347

RE: NAME CHANGE AMENDMENT

DEAR SUSAN,

YOU SPOKE TO MY HUSBAND HUGH WHITNEY EARLIER WHO SAID OUR REQUESTED NAME ZENITH LLC WAS DENIED. I AM SUBMITTING A DIFFERENT NAME CHANGE TO 7<sup>TH</sup> MANGO LLC, WHICH HE SAID YOU COULD EXPEDITE. THANK YOU.

SINCERELY,

  
ANNETTE WHITNEY

561-309-7228

Cover plus four pages

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CROTON PARK 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:

ANNETTE WHITNEY

\_\_\_\_\_  
Name of Person

7TH MANGO LLC

\_\_\_\_\_  
Firm/Company

513 U.S. HIGHWAY 1, SUITE 111

\_\_\_\_\_  
Address

NORTH PALM BEACH, FL 33408

\_\_\_\_\_  
City/State and Zip Code

ANNETTE@HOTMANGOPROPERTIES.COM

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

For further information concerning this matter, please call:

ANNETTE WHITNEY

561 309-7228  
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)

*pd previously  
with first  
name request for Zenith LLC  
which was denied*

**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**

CROTON PARK 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 07/05/2007 and assigned  
Florida document number L07000070347.

This amendment is submitted to amend the following:

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

7TH MANGO LLC

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*

*City*

*Florida*

*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>
_____	_____	_____	<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
_____	_____	_____	<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

[illegible]

(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)

(b) The 90th day after the record is filed.

Annette Whitney  
Signature of a member or authorized representative of a member

ANNETTE WHITNEY  
Typed or printed name of signer