

LD7000085798

Florida Department of State
Division of Corporations
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((H21000232146 3)))



H210002321463ABCV

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LEVIN LAW & MEDIATION GROUP
Account Number : 120140000093
Phone : (941) 953-5300
Fax Number : (941) 953-5355

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Linda@LevinMediation.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ARLINGTON CONDOMINIUM DEVELOPERS, LLC

Certificate of Status	0
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JUN 16 2021

S. PRATHER

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June 15, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ARLINGTON CONDOMINIUM DEVELOPERS, LLC
4509 BEE RIDGE ROAD
SUITE C-1
SARASOTA, FL 34233US

SUBJECT: ARLINGTON CONDOMINIUM DEVELOPERS, LLC
REF: L07000085798

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

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.

Valerie Herring
Regulatory Specialist III

FAX Aud. #: H21000232146
Letter Number: 321A00013272

COVER LETTER

H210002321463

TO: Registration Section
Division of Corporations

SUBJECT: Arlington Condominium Developers, 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:

Jerome S. Levin

Name of Person

Levin Law LC

Firm/Company

1444 1st Street, Suite A

Address

Sarasota, FL 34236

City/State and Zip Code

linda@levinmediation.com

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

For further information concerning this matter, please call:

Jerome S. Levin

941 953 5300
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

210002321463

Arlington Condominium Developers, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)RECEIVED
TALLAHASSEE, FLORIDA

2021 JUN 15 AM 8:13

FILED

The Articles of Organization for this Limited Liability Company were filed on August 22, 2007 and assigned
Florida document number L07000085798.

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:

Jerome S. Levin

New Registered Office Address:

1444 1st Street Suite A

Enter Florida street address

Sarasota

City

Florida 34236

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 603, 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

H210002321463

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

[illegible]

E. Effective date, if other than the date of filing: _____ (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 604.0207 (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, 2021

Signature of a member or authorized representative of a member

TERENCE LEVIN
typed or printed name of signee

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JAILING UNIT
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00