107000127199

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
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COVER LETTER

TO:	Registration Sec Division of Cor	ction porations		
our r		The Condo	Cure LLC	
SUBJE	.CT:	Name of Limi	ted Liability Company	
		Amendment and fee(s) are submitted the concerning this matter to	-	
		Maureen N	ieland	
			Name of Person	
•		The Condo (Cure LLC	
			Firm/Company	
		10517 Front	Beach Road #1	05
			Address	
		Panama City	/ Beach, FL 324	-07
		l	City/State and Zip Code	
•		barefootbeachrer	ntals@gmall.com o be used for future annual report notif	ication)
For fur	her information co	oncerning this matter, please ca		,
		-	 .850 249-2	0013
Maureen Nieland Name of Person		at ()	Telephone Number	
			ŕ	•
Enclose	ed is a check for th	e following amount:		
□ \$25	5.00 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Condo Cure LLC (Name of the Limite	d Liability Compar	ny as it now appears on our records.) iability Company)		
The Articles of Organization for this Limited Lia Florida document number L07000123199			and assigned	
This amendment is submitted to amend the follo	wing:		•	
A. If amending name, enter the new name of	the limited liabi	lity company here:		
The new name must be distinguishable and end with the w	vords "Limited Liabi	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		10517 Front Beach Road #105		
(Principal office address MUST BE A STREET ADDRESS)		Panama City Beach, FL 32407		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I B. If amending the registered agent and/or registered agent and/or the new registered office.)	or registered of		32407	
Name of New Registered Agent:	Maureen N	ieland	Fig. 1	
New Registered Office Address:	10517 Front Beach Road #105			
	Enter Florida street address Panama City Beach, Florida		a 32407 ₹	
New Registered Agent's Signature, if changing R	egistered Agent:	City	Zip Code	
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis	r and complete j	performance of my duties, and I	am familiar with and	

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

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.

'			
			<u> </u>
	Aı	ugust 01, 2014	
effective date must be spe	man the date of times	ceipt or filed date and cannot be mor	(optional) e than 90 days after
\cap \cap	15 2	014.	
ted Sivelle	\ 		
ited July	, _	C 110	

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Filing Fee: \$25.00

If amending the Managers or Authorized Member on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member **Title** Name **Address Type of Action** Carolyn Smith Mgr 10517 Front Beach Rd #801 Remove Panama City Beach, FL 32407 Mgr Maureen Nieland 10517 Front Beach Rd #105 ☐ Remove Panama City Beach, FL 32407 □ Add ☐ Remove □ Add