

L0800009057

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000259173 3)))



H2400025917334EC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAW OFFICE OF PAUL A. KRASKER P.A.
Account Number : 120090000078
Phone : (561)515-4722
Fax Number : (561)515-3904

SECRETARY OF STATE
PAUL A. KRASKER, FLORIDA

2024 AUG - 1 PM 12:15

FILED

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

Email Address: AMURPHY@kraskerlaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LEE M. WEISBERG LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

M. SOLOMON

AUG - 1 2024

RECEIVED

2024 AUG - 1 AM 11:33

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

H2400025 11 T 3 S

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LEE M. WEISBERG LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Andrea Murphy Snowden

Name of Person

The Law Office of Paul A. Krasker, P.A.

Firm/Company

1615 Forum Place, 5th Floor

Address

West Palm Beach, FL 33401

City, State and Zip Code

amurphy@kraskerlaw.com

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

For further information concerning this matter, please call:

Andrea Murphy Snowden

561 515-4722

Name of Person

at ()
Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$50.00 Filing Fee &
Certificate of Status

☐ \$25.00 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

2024 AUG - 1 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FL 32303

FILED

H24000254 1733

4124000259173 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LEE M. WEISBERG 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 January 23, 2008 and assigned
Florida document number 1.08000000057.

This amendment is submitted to amend the following:

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

Leon M. Weisberg LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

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

4124000259173 3

2024 AUG - 1 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

1124000259173 3

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	LEON M. WEISBERG	121 SAN MARITA WAY	☒ Add
		PALM BEACH GARDENS, FL 33418	☐ Remove
			☐ Change
MGR	LEE MARTIN WEISBERG	121 SAN MARITA WAY	☐ Add
		PALM BEACH GARDENS, FL 33418	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

SECRETARY OF STATE
1111 ALABAMA STREET
TALLAHASSEE, FL 32301-2000

2024 AUG - 1 PM 12:15

FILED

1124000259173 3

