## L08000082346

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B. BOSTICK 'AUG 3 1 2011

EXAMINER

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:	Simpl	yVerde, LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Patricia Castellano			
		Name of Person	·		
		SimplyVerde, LLC			
		Firm/Company			
	8	829 38th Avenue North			
		Address		For -	
	St.	Petersburg, Fl. 33704		TAN	en regional
		City/State and Zip Code		: # # # # # # # # # # # # # # # # # # #	emerica) Editoria
	patriciae E-mail address: (	castellano@rocketmail.com to be used for future annual report notifical	tion)		1 (±941 _ 2 2
For further information	concerning this matter, please of	•	,	H 2:3	to mer
Patr	icia Castellano	at ( 727 ) 52	21-7290	DE 6	
Name	of Person	Area Code & Daytime T	elephone Number	<del>.</del>	
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)	Certified	te of Status &	ed)

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

	SimplyVerde, LLC				
( <u>Name of the Limited Lia</u> (A Flo	ability Company as it now appe orida Limited Liability Company	ears on our records.)			
The Articles of Organization for this Limited Liabi	lity Company were filed on	August 28, 2008	and assigned		
Florida document number L0800008234	<del>16</del>				
This amendment is submitted to amend the followi	ng:				
A. If amending name, enter the new name of th	e limited liability company h	<u>ere</u> :			
The new name must be distinguishable and end with th	ne words "Limited Liability Com	pany," the designation "LL	C" or the abbreviation		
Enter new principal offices address, if applicabl	e:	TÄLL			
(Principal office address MUST BE A STREET A	ADDRESS)	=	and the second		
		<u> </u>			
Enter new mailing address, if applicable:			To: 12		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	Ţ,	7 3 6 S		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the	e name of the new		
Name of New Registered Agent:					
New Registered Office Address:  Enter Florida street address					
	. Florida				
_	City		Zip Code		
New Desistance Assetts Claustons if characters Desi	ladaman Amarada				

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jeffrey Nagle	829 38th Avenue North St. Petersburg, Fl. 33704	Add Remove
			Add Remove
<del></del>			Add Remove
	• • • • • • • • • • • • • • • • • • • •		Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, ente	er change(s) here: (Attach additional sheets, if necessary.)	
		ALLAHAS SEC. F	11 AUG 30 PH
Dated	August 24	2021 A Dam.	2: 36 - 36
	Signature of a	Patricia Castellano	
		Typed or printed name of signee	<del></del>

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Filing Fee: \$25.00