

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

**L0900006450**

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

From: Account Name : NAJMY THOMPSON, P.L.  
 Account Number : I20090000014  
 Phone : (941)907-3999  
 Fax Number : (941)896-4812

SECRETARY OF STATE  
 TALLAHASSEE, FL

2022 AUG 26 PM 1:46

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

Email Address: Cara@BeachtoBayLiving.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 TROPICAL SANDS ACCOMMODATIONS, LLC**

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AUG 29 2022

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## COVER LETTER

H 220002899973

TO: Registration Section  
Division of Corporations

SUBJECT: TROPICAL SANDS ACCOMMODATIONS, 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:

Sean Kelly

Name of Person

Najmy Thompson, P.L.

Firm/Company

1401 8th Avenue West

Address

Bradenton, Florida 34205

City/State and Zip Code

skelly@najmythompson.com

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

For further information concerning this matter, please call:

Sean Kelly

941

748-2216

Name of Person

at ( )

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

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

H 220002899973

TROPICAL SANDS ACCOMMODATIONS, 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 08/04/2021 and assigned  
Florida document number L09000006450.

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:

511 Ocean Boulevard

(Principal office address **MUST BE A STREET ADDRESS**)

Sarasota, Florida 34242

Enter new mailing address, if applicable:

P.O. Box 1726

(Mailing address **MAY BE A POST OFFICE BOX**)

Bradenton, Florida 34206

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:

Najmy Thompson, P.L.

New Registered Office Address:

1401 8th Avenue West

Enter Florida street address

Bradenton

Florida

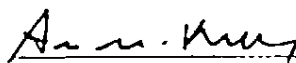
34205

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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SHAWN KALETA	102 48TH STREET	<input checked="" type="checkbox"/> Add
		HOLMES BEACH, FLORIDA 34217	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	STEVE CAVANAUGH	1211 OLD STICKNEY POINT ROAD	<input type="checkbox"/> Add
		SARASOTA, FLORIDA 34242	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TRACI NELSON	1211 OLD STICKNEY POINT ROAD	<input type="checkbox"/> Add
		SARASOTA, FLORIDA 34242	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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