L09000041084

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Essences Linky Items)
(Document Number)
(Social Nampel)
Codification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600322194326

01/17/23--01027--011 **25.00

3/22/23 VUL

FILED
2023 JAN 17 PH 4: 46
SECRETABLESS FAI

COVER LETTER

TO:

TO: Registration So Division of Cor			
SUBJECT:	BOSUN PROPE	RTIES, LLC	
30BJEC1:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		YOLANDA J. DELGADO	
		Name of Person	
		BOSUN PROPERTIES, LLC	
	-	Firm/Company	
	1114	MAYFLOWER DRIVE, SUITE 2	
		Address	
		LAKELAND, FL 33810	
		City/State and Zip Code	
	BMDJDELGADOREALTO	OR@GMAIL.COM to be used for future annual report notifi	
For further information c	oncerning this matter, please c	•	canon)
YOLANDA J DELGAD	•	863 258-8288	
	f Person	at ()	Telephone Number
		wea code Daytine	retephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	orations Illahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOSUN PROP	* * * * *		
(Name of the Lim	ited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) apany)	
The Articles of Organization for this Limited I	Liability Company were filed	on 04/28/09a	and assigned
Florida document number L09000041084	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability compa	any here:	
The new name must be distinguishable and contain the	WORDS "Limited Liability Company	CARDUP, LLC "the designation "LLC" or the abbrevia	tion "L.L.C."
Enter new principal offices address, if appli	cable:		·
Principal office address MUST BE A STRE	ET ADDRESS)	SEC	<u> </u>
Enter new mailing address, if applicable:		ANA S	
(Mailing address MAY BE A POST OFFICE BOX)		で 記案	£ 0
B. If amending the registered agent and/or agent and/or the new registered office addressed agent: Name of New Registered Agent:		our records, enter the name of t	he new regist
Name of New Registered Agent.			,
New Registered Office Address:	1114 Mayflower Drive	to Plant I amount of the	
		ter Florida street address	
	Lakeland	, Florida 33810	
	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

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>	Address	Type of Action
			□Add
			□Remove
			Change

			Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□ Changa

D. II amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
(If an effective <u>Note:</u> If th	late, if other than the date of filing: (optional) e 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 605.0207 (3)(the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective date on the Department of State's records.
f the record spe ecord is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	anuary 15, 2023
	Signature of a member or authorized representative of a member
-	Typed or printed name of sighee