## L10000125204

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO:

TO: Registration Se Division of Cor						
	RSTONE FINANCIAL LLC					
SUBJECT:	Name of Limi	ited Liability Company				
The enclosed Articles of .	Amendment and fee(s) are sub-	mitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
	JAMES S. GALLAGHER					
		Name of Person				
	WATERSTONE FINANC	IAL LLC				
		Firm/Company	• <del>-</del>	S 2	ગુ	
	12597 NEW BRITTANY I	BLVD.		TALL	3 5	•
•		Address		AA A	∑ ∑	•
	FORT MYERS, FLORIDA	x 33907		288 288	_ <u>≥</u>	•
		City/State and Zip Code			H II: 2	
	E-mail address: ()	to be used for future annual report notific	ation)	ंगि	0	
For further information co	oncerning this matter, please ca	all:				
JAMES S. GALLAGHE	R	239 288-0977 at ()				
Name of	f Person		Celephone Number	<del> </del>		
Enclosed is a check for th	ne following amount:					
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status d		
Mailing Addres Registration S Division of C	Section	Street Address: Registration Secti Division of Corpo				
P.O. Box 632		The Centre of Tal	llahassee			
Tallahassee, l	FL 32314	2415 N. Monroe :	Street, Suite 8	10		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WATERSTONE FINANCIAL 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 Compa Florida document number L10000125204	any were filed on DE	CEMBER 6, 2010	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited l	iability company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited L	iability Company," the d	esignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	12597 NEW BR	ITTANY BLVD.	
(Principal office address MUST BE A STREET ADDRESS)	FORT MYERS, FL 33907		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered offi	FORT MYERS,		e of the new registered
agent and/or the new registered office address here:			
Name of New Registered Agent: JAMES S. C	GALLAGHER		
New Registered Office Address: 12597 NEW	BRITTANY BLVD.		
	Enter Flor	ida street address	
FORT MYE		, Florida <u></u>	907
	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>	<u>Address</u>	Type of Action
MGRM	ALAN WHITE	1014 DOLPHIN DRIVE	□Add
		CAPE CORAL, FL 33904	
			□Change
			□Add
			□Remove
			□ Change
		□Add	
			Remove
		<del></del>	□Add
			Remove
		Change	
		🗆 Add	
	***************************************	□Remove	
		☐ Change	
	<del>-,</del>	□Add	
			□Remove
			□Change

Effective date, if other than the date of filing:		
Effective date, if other than the date of filing:  (If an effective 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  Nate: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed.  Dated  AUGUST 18  2021  Signature of a member or supported representative of a member		
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(If an effective 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  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed.  Dated  AUGUST 18  Signature of a member or authorized representative of a member  Signature of a member or authorized representative of a member		
(If an effective 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  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed.  Dated  AUGUST 18  Signature of a member or authorized representative of a member  Signature of a member or authorized representative of a member	_	
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Signature of a member or authorized representative of a member		
<b>v</b>	Dated	AUGUST 18 2021
· ·		Signature of a member or authorized representative of a member
		V

Filing Fee: \$25.00