

L11000034181

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/14/17--01043--002 **25.00

FILED

17 SEP -5 PM 4: 07

DIVISION OF CORPORATE AFFAIRS

O SIMMONS
SEP -6 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2017

ANTHONY & SABRINA SODANO
15347 NAVION DR
PORT ST LUCIE, FL 34987

SUBJECT: CRESENCE, LLC
Ref. Number: L11000034181

We have received your document for CRESENCE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There are two separate documents attached, however there can only be one Registered Agent listed for the company. If you are trying to add a member and change register agent, then you just need to file amendment form only

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist II

Letter Number: 217A00016822

RECEIVED
2017 SEP -5 PM 15:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CRESENCE 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 3/21/11 and assigned Florida document number 111000034181.

This amendment is submitted to amend the following:

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

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

Anthony & Sabrina Sodano

New Registered Office Address:

Same

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.

Sabrina Sodano

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>	<u>Type of Action</u>
MGR	Anthony Sodano	15347 Navion DR.	<input type="checkbox"/> Add
		PORT ST. LUCIE, FL	<input type="checkbox"/> Remove
		34987	<input type="checkbox"/> Change
AMBR	Sabrina Sodano	15347 Navion DR.	<input checked="" type="checkbox"/> Add
		PORT ST. LUCIE, FL	<input type="checkbox"/> Remove
		34987	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

17 SEP 15 PM 4: 07
DIVISION OF
CORRECTIONS

FILED

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

We need to add Sabrina Sodano
to the business CRESENCE LLC

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DIVISION OF STATE OPERATIONS

E. Effective date, if other than the date of filing: 8/7/2017 (optional)

(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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

Dated August 7th 2017.



Signature of a member or authorized representative of a member

Anthony Sodano

Typed or printed name of signee