

L11000055050

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

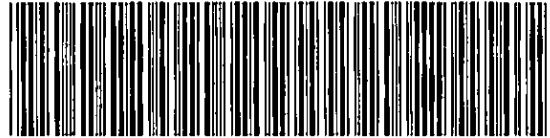
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500315728815

Filing cancelled  
due to returned check

07/16/18--01040--009 \*\*25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JUL 16 AM 8:44

N COOPER

JUL 24 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CORK TRICK, LLC

Name of Limited Liability Company

**Filing cancelled  
due to returned check**

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL E. FERNANDEZ

Name of Person

DANIEL E. FERNANDEZ P.A.

Firm/Company

7480 SW 40TH STREET, STE. 760

Address

MIAMI, FL 33155

City/State and Zip Code

DANIEL@DFERNANDEZLAW.COM

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

For further information concerning this matter, please call:

DANIEL E. FERNANDEZ

305 264-0881  
at ( )

Name of Person

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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Filing cancelled  
due to returned check

CORK TRICK, 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 MAY 10, 2011 and assigned  
Florida document number L11000055050.

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:

(Principal office address MUST BE A STREET ADDRESS)

c/o Daniel E. Fernandez P.A.

7480 SW 40th Street, Ste. 760

Miami, FL 33155

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

c/o Daniel E. Fernandez P.A.

7480 SW 40th Street, Ste. 760

Miami, FL 33155

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JUL 16 AM 8:44

**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:

DANIEL E. FERNANDEZ P.A.

New Registered Office Address:

7480 SW 40TH STREET, STE. 760

*Enter Florida street address*

MIAMI

*City*

Florida 33155

*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

Filing cancelled  
due to returned check

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MR	PETER S. WARHURST	535 Hercules S. Ave. STE. 201B	<input type="checkbox"/> Add
		Clearwater, FL 33764	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	NEWMAN ARNDT	c/o Daniel E. Fernandez P.A.	<input checked="" type="checkbox"/> Add
		7480 SW 40th Street, Ste. 760	<input type="checkbox"/> Remove
		Miami, FL 33155	<input type="checkbox"/> Change
AMBR	JOHN ARNDT	c/o Daniel E. Fernandez P.A.	<input checked="" type="checkbox"/> Add
		7480 SW 40th Street, Ste. 760	<input type="checkbox"/> Remove
		Miami, FL 33155	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Filing cancelled  
due to returned check

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JUL 16 AM 8:44

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

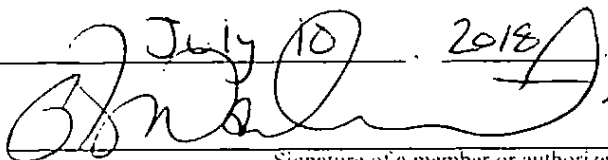
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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

July 10, 2018  


Signature of a member or authorized representative of a member

PETER S. WARHURST, AS MANAGING MEMBER

Typed or printed name of signee