

L12 0000 38708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

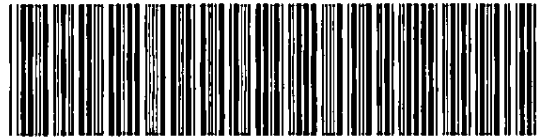
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200365901392

05/10/21--01036--023 **25.00

2021 JUN 29 PM 2:43

2021 JUN 29 PM 2:43



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2021 JUN 29 PM 2:16

STATION
FALL - 2021

June 17, 2021

ALFRED KOONTZ III
1401 HWY A1A STE 202
VERO BEACH, FL 32963

SUBJECT: VERO BEACH HOTEL 403, LLC
Ref. Number: L12000038708

We have received your document for VERO BEACH HOTEL 403, 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):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers
Regulatory Specialist II

Letter Number: 421A00013622

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Vero Beach Hotel 403, 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:

Alfred Koontz III

Name of Person

Vero Atlantic I, LLC

Firm/Company

1401 Hwy A1A, Suite 202

Address

Vero Beach, FL 32963

City/State and Zip Code

aj.koontz@cbholding.com

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

For further information concerning this matter, please call:

AJ Koontz

772
at ()

360-4587

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Vero Beach Hotel 403, 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 March 19, 2012 and assigned
Florida document number L12000038708.

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:

1401 Hwy A1A, Suite 202, Vero Beach, FL 32963

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

1401 Hwy A1A, Suite 202, Vero Beach, FL 32963

(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:

Vero Atlantic I, LLC

New Registered Office Address:

1401 Hwy A1A, Suite 202

Enter Florida street address

Vero Beach

Florida 32963

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>	<u>Type of Action</u>
MGR	Vero Atlantic 1, LLC	1401 Hwy A1A, Suite 202, Vero Beach, FL 32963	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Douglas E. Miller Revocable Trust	1075 HARBOR ISLAND LN, Vero Beach, FL 32967	<input type="checkbox"/> Add
			<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
			<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

[illegible]

(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)

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 May 6, 2021


Signature of a member or authorized representative of a member

Alfred J. Kountz, III
Typed or printed name of signee

Filing Fee: \$25.00