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(Business Entity Name)

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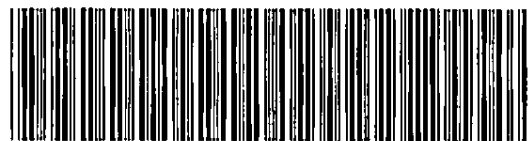
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115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 12/27/2023

Name: Juliana

Reference #: 2219667

Entity Name: CASTELLA PROPERTIES, LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☒ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

Authorized Amount: \$25.00

Signature: Juliana Prestia



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☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25.00

Signature: Juliana Prestia

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CASTELLA PROPERTIES, 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:

AMY DEAN

Name of Person

MELTZER, PURTELL & STELLE LLC

Firm/Company

1515 E. WOODFIELD RD., STE. 250

Address

SCHAUMBURG, IL 60173

City/State and Zip Code

ADEAN@MPSLAW.COM

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

For further information concerning this matter, please call:

AMY DEAN

847

330-6045

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 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**

CASTELLA PROPERTIES, 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 JULY 3, 2012 and assigned
Florida document number 112000087325.

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)

Enter new mailing address, if applicable:

(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:

Corporation Service Company

New Registered Office Address:

1201 Hays Street

Enter Florida street address

Tallahassee

Florida 32301

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.

Melissa Clarke, Melissa Clarke, Asst. V.P.

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	HAROLD V. ANAGNOS	24011 VIA CASTELLA, UNIT 2403	<input type="checkbox"/> Add
		BONITA SPRINGS, FL 34134	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CHRIS LIMBERAKIS	24011 VIA CASTELLA, UNIT 2403	<input checked="" type="checkbox"/> Add
		BONITA SPRINGS, FL 34134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CONSTANTINE LIMBERAKIS	24011 VIA CASTELLA, UNIT 2403	<input checked="" type="checkbox"/> Add
		BONITA SPRINGS, FL 34134	<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

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847 330-6045

Name of Person

at (_____) _____
Area Code

Daytime Telephone Number

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- ☒ \$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)

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