

C17 000 101071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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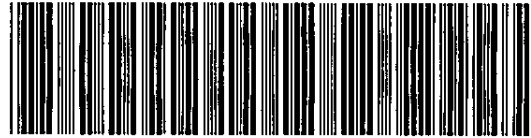
(Business Entity Name)

(Document Number)

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CLERK OF DISTRICT COURT
JULIA A. BROWN

J. Shivers NOV 19 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VILLA BRUNA, 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:

Lucy Dratler

Name of Person

Dollars and Sense, LLC

Firm/Company

5650 Yahl St #2

Address

Naples, FL 34109

City/State and Zip Code

dollars-and-sense@hotmail.com

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

For further information concerning this matter, please call:

Lucy Dratler

Name of Person

at (239) 272-2283

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

RECEIVED
12 NOV 18 AM 11:55
TALLAHASSEE, FL
DIVISION OF CORPORATIONS

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

VILLA BRUNA, 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 07-17-13 and assigned
Florida document number L13000101071.

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 end with 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)

5650 YAHL ST #2
NAPLES, FL 34109

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2200 MALIBU LAKE CIR
APT 928
NAPLES, FL 34119

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:

DOLLARS AND SENSE, LLC

New Registered Office Address:

5650 YAHL ST #2

Enter Florida street address

NAPLES

City

34109

Florida 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

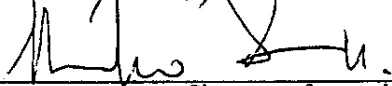
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ALESSANDRO DERIN	2200 MALIBU LAKE CIR	<input checked="" type="checkbox"/> Add
		APT 928	<input type="checkbox"/> Remove
		NAPLES, FL 34119	
MGR	ALESSANDRO DERIN	1110 BRICKELL AVENUE	<input type="checkbox"/> Add
		STE 430	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33131	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated 11/13/2018, _____



Signature of a member or authorized representative of a member

ALESSANDRO DERIN

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

NOV 13 2018 11:51 AM
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE