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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	MELBOURNE COURT LLC, a Florida Limited Liability Company				
SUBJECT.		Name of Lim	ited Liability Company		
The enclosed	Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Joel Piotrkowski, Esq.			
			Name of Person		
		Green & Piotrkowski PLL	C		
			Firm/Company		
		317 - 71st Street			
		·	Address		
		Miami Beach, Florida 331-	41		
			City/State and Zip Code		
		joel@gkppa.com			
		E-mail address: ()	to be used for future annual report noti	fication)	
For further in	nfornation c	oncerning this matter, please ca	all:		
Joel Piotrkov	wski		305 865-4314 at ()		
	Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a	check for th	e following amount:			
≅ \$25.00 F	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)	
Reg Div P.C	iling Addres gistration S vision of C D. Box 632 lahassee, I	Section Torporations 7	Street Address: Registration Second Division of Core The Centre of Tallahassee, FL	porations fallahassee e Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

as it now appears on oblity Company) ere filed on		and assigned
ere filed on	2013	and assigned
y company here:		
Company," the designa	tion "LLC" or the abbrev	iation "L.L.C."
		202
		; ; 2023 COT
		· · · · ·
		P: ::
		-
dress on our record	is, <u>enter the name of</u>	the new register
Enter Florida sti	vet address	
	, Florida	
City	-	Lip Code
erformance of my covided for in Chap	hities, and I am fam ier 605, F.S. Or, if t	iliar with and his document is
d	Company," the designate leaves on our record asternation act in this capacity formance of my activated for in Chapitalian and the control of the capacity of t	Company," the designation "LLC" or the abbrev dress on our records, enter the name of Enter Florida street address, Florida

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>	Type of Action
MGR	RICHARD E. BALDA	2029 Melbourne Ct	≅Add
		Melbourne, FL 32901	□Remove
			□Change
MGR	AIMEE N. BALDA	2029 Melbourne Ct	≣Add
		Melbourne, FL 32901	□ Rепюче
MGR	Melbourne Court, LLC	2029 Melbourne Ct	□ Add
		Melbourne, FL 32901	≅Remove
			
			□ Кетюуе
			Change
			□ Add
		 	□Remove
			□Change
			□ Add
			□Remove
			□Change

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
_	
Note: If	date, if other than the date of filing:
cord is filed	
Dated	October 26, 2023 Risk Bally Signature of a member or authorized representative of a member
	Kúl Bally
	RICK BALDA
	Typed or printed name of signee

ECUL EL MOSEO