

L14 0000 65 923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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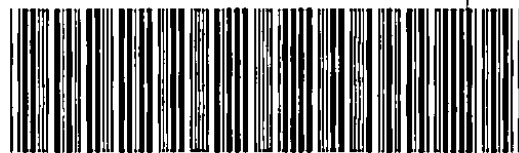
(Business Entity Name)

(Document Number)

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2019 SEP 26 PM 1:14

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SALTWATER SYNDICATE 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:

JASON T BRICK

Name of Person

SALTWATER SYNDICATE LLC

Firm/Company

1350 SPERLING CT

Address

NAPLES, FL 34103

City/State and Zip Code

JASON@SALTWATERSYNDICATE.COM

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

For further information concerning this matter, please call:

JASON T BRICK

239

273-6053

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

TO
ARTICLES OF ORGANIZATION
OF

SALTWATER SYNDICATE 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 04/23/2014 and a
Florida document number L14000065923.

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4775 MERCANTILE AVE

SUITE 1

NAPLES, FL 34104

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4775 MERCANTILE AVE

SUITE 1

NAPLES, FL 34104

**B. If amending the registered agent and/or registered office address on our records, enter the new
registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Hahn Loeser & Parks LLP, Attention: Robert A. Cooper, Esq.

New Registered Office Address:

2400 First Street, Suite 300

Enter Florida street address

FORT MYERS

City

Florida 33901

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 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 amendment 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type</u>
MGR	VICTOR H FRANCO JR	4775 MERCANTILE AVE	<input checked="" type="checkbox"/> /
		SUITE 1	<input type="checkbox"/> I
		NAPLES, FL 34104	<input type="checkbox"/> C
			<input type="checkbox"/> /
			<input type="checkbox"/> I
			<input type="checkbox"/> C
			<input type="checkbox"/> /
			<input type="checkbox"/> R
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			<input type="checkbox"/> R
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			<input type="checkbox"/> C
			<input type="checkbox"/> A
			<input type="checkbox"/> Re
			<input type="checkbox"/> Ch

08/26/2019

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 6

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be li
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 ear
(b) The 90th day after the record is filed.

Dated AUGUST 29TH 2019

Signature of a member or authorized representative of a member

JASON T BRICK

Typed or printed name of signee