L14000107503

(F	Requestor's Name)	
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	Address)	
- (0	City/State/Zip/Phone #)	
PICK-UP	MAIT	MAIL
(E	Business Entity Name)	
([Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	
		





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COVER LETTER

	on of Corpo			
SI SUBJECT:	NO BEACE	I, LLC		
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed A	rticles of Ar	nendment and fee(s) are subt	nitted for filing.	
Please return al	correspond	lence concerning this matter t	to the following:	
		Victoria Hart		
			Name of Person	
			Firm/Company	
		310 MAIN STREET		
			Address	
		SAFETY HARBOR, FL 3-	4695	
		vhistuff@gmail.com	City/State and Zip Code	
		E-mail address: (t	to be used for future annual report notific	cation)
For further info	rmation con	cerning this matter, please ca	all:	
Victoria Hart			at () 310-7079 Area Code Daytime	
-	Name of I	Person	Area Code Daytime	Telephone Number
Enclosed is a cl	neck for the	following amount:		
■ \$25.00 Filis	ng 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sno Beach, 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 $\frac{07/08/2014}{1}$ Florida document number 1.14000107503 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 310 Main Street Enter new mailing address, if applicable: Safety Harbor, FL 34695 (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: Victoria Hart Name of New Registered Agent: 310 Main Street New Registered Office Address: Enter Florida street address Safety Harbor

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>	Address	Type of Action
MGR	KELLY S FITZPATRICK	221 SHORT ST SAFETY HARBOR, FL 34695	Add
			■ Remove
			Change
MGR	Victoria Hart	310 Main Street SAFETY HARBOR, FL 34695	⊟ Add
			☐ Remove
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Effectiv	late, if other than the date of filing: (optional)
(If an effective Note: I	e 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 605.0 e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at effective date on the Department of State's records.
the reco) The S	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies the day after the record is filed.
Dated _	ary 15 2020
Daied _	Victoria Hart
	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00