# L14000 112962

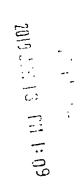
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Amend

JUN 13 7019 I ALKRITTON

### **COVER LETTER**

TO: Registration So Division of Cor			
SUBJECT:	2244PL L Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and feets) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Nex B	Name of Person	······································
		Firm/Company	
	2374 U	UITTON DR	
	WILTON	MANORS FL	33305
	PROZACI	City/State and Zip Code  DIVER DIVAND. C	(fication)
For further information c	n-man address (	to be used to rutuse amula report not	realiony
DICK	Benef	Sthis matter to the following:  CK BCKY  Name of Person  Firm/Company  74 WITTON DZ  Address  TON MANORS FL 33305  City/State and Zip Code  2ACDINER O YAKOO. Common and address (to be used for future annual report notification)  ter, please call.  at (954) 805-1195  Area Code  Daytime Telephone Number	
Name o	Firm/Company  2374 WITTON DR  Address  WILTON MANDRS FL 33305  City/State and Zip Code  PROZACDIVER WAND. Com  E-mail address (to be used for future annual report notification)  arther information concerning this matter, please call.		
Enclosed is a check for t	he tollowing amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Lee & 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 Tallahussee, FE 32314

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



June 6, 2019

NICK BERRY 2374 WILTON DR WILTON MANORS, FL 33305

SUBJECT: 2244FL LLC

Ref. Number: L14000112962

We have received your document for 2244FL LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 319A00011351

Irene Albritton Regulatory Specialist II

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2244FL 1	LLC
(A Florida Limited	pany as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L(40001129UZ</u>	by were filed on $\frac{7/17/2014}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Lial	bility 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 registered agent and/or the new registered office address he Name of New Registered Agent:	office address on our records, enter the name of the newere:
Name of New Registered Agent.	
New Registered Office Address:	
	Emer Florida street address
·	Florida
	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.

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>	Name	Address	Type of Action
MGR	USINU COMPANY LLC	2374 WILTON DR	🗆 Add
		WILTON MANDRS, FL 33305	Remove
			Change
MGR	ANDREA POZZI	2374 WILTON DIZ WILTON MANORS FL	Add
		33305	Remove
			Change
			🗖 Add
			□ Remove
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Effective d	ate, if other tha	n the date of (	filing: 6-	17-19		(optional) ys after filing.) Pursuan	
Note: If the	date is listed, the da e date inserted in effective date on	this block does:	not meet the ap	plicable statutory	g or more than 90 da filing requiremen	ys after filing.) Pursuan its, this date will not	t to 605.0207 be listed as
		layed effecti		not an effect	ive time, at 12	:01 a.m. on the	earlier of:
	specifies a de h day after the		ieu.				
The 90t	5/20/19	e recora is fi	_:				
	5/20/19	e recora is fi	_:	uthorized represen	tative of a member		

Page 3 of 3

Filing Fee: \$25.00