44000140041

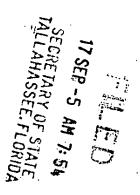
(Re	questor's Name)	_
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900303149359

09/05/17--01018--024 **60.00



SEP 0 6 2017 J SHIVERS

COVER LETTER

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

The Boardwalk A	arnou L	LC		
(Name of the Limited Liability Compan (A Florida Limited Lia	y as it now appears on o ability Company)	our records.)		
The Articles of Organization for this Limited Liability Company v Florida document numberL14000140047	vere filed on9_	8-2014	and assig	ned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	ity company here:			
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designa	ation "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 off registered agent and/or the new registered office address here:		records, ente	r the name o	f the new
Name of New Registered Agent:			SEGRE IĄLLAH,	" • • • • •
New Registered Office Address:	Enter Florida st	reet address : Florida	ARY O	A Charles
	City •		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			FAIL RID	in the second
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my o rovided for in Chap	luties, and I am ter 605, F.S. O	ı familiar with r, if this docur	and nent is

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 **Type of Action** Title Name_e **Address** 18514 US Highway 191) Carolyn James Clearwater, Fl. 33764 ☐ Change Paul Scagnelli 18514 US Highway 19 N. Cleanwater, Pl. 33764 ☐ Change MGR Louise Scagnelli 18514 US Highway 191 Clearwater, Fl. 33764 Change □ Add □ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

	•	-
_		_
-		-
-		_
		_
		_
_		
-	•	_
-	AE 17	_
_	AH.	- ' :
_	ASSE	- () Carum Maria
_	Eng. A	-3
=	S FATE	-trans
	Şm →	_
-		_
Note:	ve date, if other than the date of filing: 8-28-19 (optional) ctive 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 60 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed; seffective date on the Department of State's records.	05.0207 sted as 1
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear 90th day after the record is filed.	lier of
)ated	PaulCoanelle	
	Signature of a member or authorized representative of a member	
	Paul Scaanelli	

Page 3 of 3

Filing Fee: \$25.00