

14000164404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

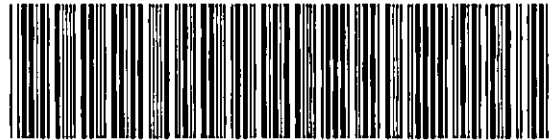
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

K SALY
DEC 18 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vidussi, Goldsmith, Hull & Co., LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dana Vidussi

Name of Person

Vidussi Makara Group, LLC

Firm/Company

1361 Royal Palm Square Blvd., Suite 1

Address

Fort Myers FL 33919

City/State and Zip Code

DanaV@VMGCPA.com

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

For further information concerning this matter, please call:

John L. Pilatski

239

590.9864

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

VIDUSSI, GOLDSMITH, HULL & CO., LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 10/22/2014 and assigned
Florida document number L14000164404.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

VIDUSSI MAKARA GROUP, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1361 ROYAL PALM SQUARE BLVD, Suite 1

(Principal office address MUST BE A STREET ADDRESS)

FORT MYERS FL 33919

Enter new mailing address, if applicable:

same as principal office address

(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:

Name of New Registered Agent:

John L. Pilarski

New Registered Office Address:

5237 Summerlin Commons Blvd #306

Enter Florida street address

Fort Myers

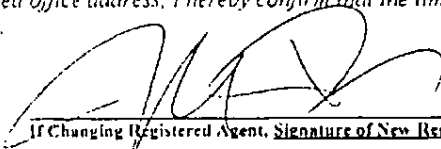
Florida 33907

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Leon D. Goldsmith CPA PA	1361 Royal Palm Sq Blvd #1 Fort Myers FL 33919	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Dana Vidussi, CPA, PA	1361 Royal Palm Sq Blvd #1 Fort Myers FL 33919	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Mark Makara, LLC	1361 Royal Palm Sq Blvd #1 Fort Myers FL 33919	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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CLERK OF COURT
JANICE L. HENDON

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

None

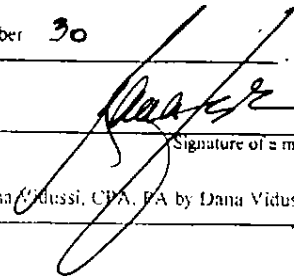
Lined area for amendments.

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TALLAHASSEE, FLORIDA

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 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 earlier of:
(b) The 90th day after the record is filed.

Dated November 30, 2018



Signature of a member or authorized representative of a member



Dana Vidussi, CPA, PA by Dana Vidussi Auth. Member

Typed or printed name of signer