

L15000021218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

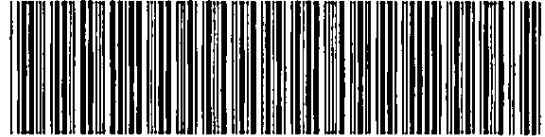
(Business Entity Name)

(Document Number)

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19 DEC 23 AM 9:25

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Casa Bella Residential Staffing, 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:

Michael Wright

Name of Person

Casa Bella Residential Staffing, LLC

Firm/Company

224 Datura Street #917

Address

West Palm Beach, FL 33401

City/State and Zip Code

michael@casabellastaffing.com

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

For further information concerning this matter, please call:

Michael Wright

407

267-1072

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

19 DEC 23 AM 9:25
TALLAHASSEE, FL 32303
DIVISION OF CORPORATIONS
REGISTRATION SECTION

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Casa Bella Residential Staffing, LLC

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

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CLERK OF COURT

The Articles of Organization for this Limited Liability Company were filed on 02/04/2015 and assigned
Florida document number 115000021218

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

224 Datura Street, Suite 917

West Palm Beach, FL 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

224 Datura Street, Suite 917

West Palm Beach, FL 33401

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:

Michael Wright

New Registered Office Address:

224 Datura Street, Suite 917

Enter Florida street address

West Palm Beach

City

Florida 33401

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>
Mrs.	Isabel Marques	3670 Vintage Way	<input type="checkbox"/> Add
		West Palm Beach, FL 33405	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mr.	Michael Wright - MGR.	16227 Wind View Lane	<input checked="" type="checkbox"/> Add
		Winter Garden, FL 34787	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mr.	Andrew Lowrey - MGR.	1007 North Calvert Street	<input checked="" type="checkbox"/> Add
		Baltimore, MD 21202	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: October 3, 2019 (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 12/18, 2019

Signature of a member or authorized representative of a member

Michael Wright

Typed or printed name of signee

Florida Department of State Amendment for Casa Bella Residential Staffing, LLC

To whom it may concern,

I'm writing this cover letter for the attached amendment to Casa Bella Residential Staffing, LLC. We accidentally filled out a change to registered agent for the company back on October 10, 2019 and meant to fill out an amendment to change names of ownership.

New owners are:

Michael Wright & Andrew Lowrey (please see attached form)

Please remove old owner:

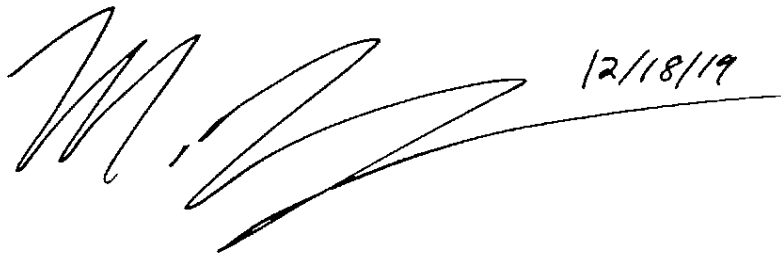
Isabel Marques (please see attached form)

For all details please do not hesitate to reach me on my cell phone at 407-267-1072. My home address is 16227 Wind View Lane, Winter Garden, FL 34787 or office 224 Datura Street #917, West Palm Beach, FL 33401

Thank you in advance for all of your help in this matter.

Sincerely,

Michael Wright

A handwritten signature in black ink, appearing to be 'M. Wright', followed by a horizontal line. To the right of the signature, the date '12/18/19' is handwritten.