

L15000037054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

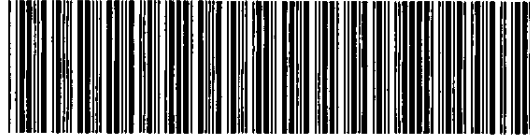
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Vincent J. Grucci Trust, 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:

Vincent J. Grucci

Name of Person

Vincent J. Grucci Trust, LLC

Firm/Company

26 Harbour Drive North

Address

Ocean Ridge, FL 33435

City/State and Zip Code

VJGrucci@aol.com

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

For further information concerning this matter, please call.

Vincent J. Grucci

631 286-2800
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**

Vincent J. Grucci Trust, 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 01/09/2015 and assigned
Florida document number L15000037054

This amendment is submitted to amend the following:

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

26 Harbour Drive North ~~LLC~~, 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:

(Principal office address MUST BE A STREET ADDRESS)

26 Harbour Drive North

Ocean Ridge

Florida, 33435

Enter new mailing address, if applicable:

(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:

New Registered Office Address:

Enter 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.

Vincent Grucci SAVE

AUTHORIZATION BY PHONE TO

CORRECT Amended name

DATE 8/13/15

DOC. EXAM Smason

If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FLORIDA

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

This application is to change the name from the Vincent J. Grucci Trust, LLC to the 26 Harbour Drive North LLC
and to remove the current Manager Mr. Cole J. Uhrig as and affiliation with this LLC as of 08/08/2015. Finally,
PLEASE ADD THE LLC's EIN Number of 47-2693966 to ALL records.

E. Effective date, if other than the date of filing: 09/01/2015 **(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 August 08,

2015

Signature of a member or authorized representative of a member

Vincent J. Grucci Managing Member

Typed or printed name of signee

FILED
09 AUG 12 A 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA