L15000057708

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
tified Copies	_ Certificates	of Status
pecial Instructions to	Filing Officer:	
···-		

Office Use Only



100352410401

09/28/20--01907--012 **30.00

10 11/2 /20

COVER LETTER

0:

O: Registration S Division of Co			
	BOT, LLC	·	
UBJECT:	Name of Lin	nited Liability Company	
he enclosed Articles o	of Amendment and fee(s) are sul	omitted for filing.	
lease return all corresp	nondence concerning this matter	to the following:	
	JOHN M. ALEXANDER		
		Name of Person	
	6342 TALBOT, LLC		
		Firm/Company	
	4411 BEE RIDGE ROAD	NO. 370	
		Address	
	SARASOTA, FLORIDA	34233	
	AuroraPropServ@gmail.co	City/State and Zip Code	
		to be used for future annual report notificati	on)
or further information	concerning this matter, please of	eall:	
OHN ALEXANDER		941 724-5907 at ()	
Name	of Person		ephone Number
nclosed is a check for	the following amount:		
S25.00 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)
	Section Corporations	Street Address: Registration Section Division of Corporation	ations
P.O. Box 63 Tallahassee,		The Centre of Talla 2415 N. Monroe St Tallahassee, FL 32.	reet, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

6342 TALBOT, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) ne Articles of Organization for this Limited Liability Company were filed on 4 - 1-2015 and assigned orida document number L15000057708 his amendment is submitted to amend the following: . If amending name, enter the new name of the limited liability company here: ie new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) nter new mailing address, if applicable: **<u>1ailing address MAY BE A POST OFFICE BOX)</u>** . If amending the registered agent and/or registered office address on our records, enter the name of the new registered ent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

ew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and except the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is sing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

. Florida

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager MBR = Authorized Member

<u>tle</u>	<u>Name</u>	Address	Type of Action
GR ——	JOHN M. ALEXANDER	4063 Southwell Way, Sarasota, Florida 34241	= Add
			□Remove
			Change
			🗀 Add
			□Remove
			Change
			□ Add
			2020 SEP 28 PH
			□Remove
			🗆 Change
			□ Add
			□ Remove
			□Change
			□ Add
			□ Remove
			□Change

			<u>.</u>		
					
	· 				
				···	
	<u>. </u>				
				· ·	
				<u> </u>	202d s
				257	SEP.
				AS	28
				Mar Mar	- H 2
		·	· · · · · · · · · · · · · · · · · · ·	72	Ω ;
				177	t-
ctive date, if other than the date of filing:				ional)	
effective date is listed, the date must be specific and cannot 11 the date inserted in this block does not meet the					
ment's effective date on the Department of State's	records.				
. 1		. 12.01	Al	L) TL-00.L 1	4> •1-
ord specifies a delayed effective date, but not an ef filed.	rective time, a	it 12;01 a,m. or	the carner or. (o) The 90th a	ay arter to
(1)	• 0				
d SEPTEMBER 25	 -				
$I \cap I$,				
$\alpha M_{LA} / M_{\Delta}$		representative o			