## 15000098404

(Re	equestor's Name)	
(A.	dd:	
(AC	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #	<i>f</i> )
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Name	·)
(Do	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO: Registration So Division of Cor			
	REALTY, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	unitted for filing	
	ondence concerning this matter		
	Chris M. Vorbeck		
	<del></del>	Name of Person	
	The Law Office of Chris N	4. Vorbeck, P.A.	
		Fimi/Company	
	4470 Northgate Court		
		Address	<del></del>
	Sarasota, FL 34234		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	Vorblaw@aol.com	to be used for future annual report no	(ification)
For further information of	concerning this matter, please c	·	in Callotty
Chris M. Vorbeck		941 921-3124	
Name o	of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	he 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 ! Division of C	Section	Street Address: Registration Se Division of Co	
P.O. Box 6327		The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



June 19, 2023

CHRIS M VORBECK THE LAW OFFICE OF CHRIS M. VORBECK, P.A. 4470 NORTHGATE COURT SARASOTA, FL. 34234

SUBJECT: LENMAR REALTY, LLC Ref. Number: L15000098404

We have received your document for LENMAR REALTY, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 323A00013777

Valerie Herring Regulatory Specialist III Internet Support

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi	ted Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L Florida document number <u>L15000098404</u>	iability Company	were filed on 06/04/2015	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	20340 Heritage Point Drive	2023 FAUL
(Principal office address MUST BE A STREI	ET ADDRESS)	Tampa, FL 33647	C A A
			AUG 18 AHASSEI
Enter new mailing address, if applicable:		20340 Heritage Point Drive	
(Mailing address MAY BE A POST OFFICE BOX)		Tampa, FL 33647	DRIDA DRIDA
B. If amending the registered agent and/or agent and/or the new registered office addressed agent and/or the new Registered Agent:			e name of the new registe
<del></del>	4470 Northgate	Court	
New Registered Office Address:	Northgate	Enter Florida street address	
	Sarasota	Flori	ida <sup>34234</sup>
		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>	Address	Type of Action
MGR	Beatrice Akinyi Kawuna	20340 Heritage Point Drive	🗆 Add
		Tampa, FL 34647	■Remove
			□Change
MGR	Beatrice Kawuma	20340 Heritage Point Drive	<b>=</b> Add
		Tampa, FL 34647	□Remove
			□Change
			□Add
			□Remove
			□Change
			DAdd
			□Remove
			□Change
	<del>-</del> -	□Add	
			Remove
			□Change
		<del></del>	□Remove
			□Change

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	<u> </u>
Effective date, if other than the date of filing:  fan effective date is listed, the date must be specific and cannot be prior to date of filing or more than a Note:  If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	(optional) 90 days after filing.) Pursuant to 605.0207 cements, this date will not be listed as t
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ead is filed.	arlier of: (b) The 90th day after the
Dated March 30 . 2023	
	nber

Filing Fee: \$25.00