L500141562

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE

TALLARYSSEE FILES

OCT 2.2 2015 S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 6, 2015

JEFFREY L EVANS 2614 TAMIAMI TRAIL N STE 444 NAPLES, FL 34103

SUBJECT: 2614 ASSOCIATES, LLC

Ref. Number: L15000141562



We have received your document for 2614 ASSOCIATES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return 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) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 115A00021167

www.sunbiz.org

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	rporations -		
SUBJECT:	2614	ASSOCIATES,	LLC
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	TASS 5
Please return all correspo	ondence concerning this matter	to the following:	SEE SEE
		EFFREY L. EV	ORATION 2
	2	Firm/Company	ES, LLC
	2	-614 TAMIAMI Address	TRL N STE 44L
		JAPLES FL 341	03
	E-mail address: ()	City/State and Zip Code jevans 67@gmail.c to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca		,
JEFFREY Name o	L. EVANS of Person	at (239) 261- Area Code Daytime	Telephone Number
Enclosed is a check for t	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)
Regist Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURING Registration Section Division of Corpora Clifton Building	n .

2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION OF

	A550C	,	LLC	
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it a Limited Liability	now appears on Company)	our records.)	
The Articles of Organization for this Limited Liability Co.		iled on	8/18/20	and assigned
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the lim</u>	ited liability co	ompany here:		
The new name must be distinguishable and contain the words "Lim	nited Liability Con	npany," the design	ation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:				्रि ज
Principal office address MUST BE A STREET ADDI	RESS)		2.5	
			<u> </u>	S IN CONS
Enter new mailing address, if applicable:			<u>'Q</u>	<u></u>
Mailing address MAY BE A POST OFFICE BOX)				7E 20
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		ddress on ou	r records, <u>ente</u>	r the name of the ne
Name of New Registered Agent:	JEFFR	KEY L	. EVANS	
New Registered Office Address:	2614	Tamia Enter Floridas	mi Tcl I treet address	N STE 444
	Naple	2۔	, Florida _	34103
	Ci	ty		Zip Code
New Registered Agent's Signature, if changing Registere	d Agent			

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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
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Effective date, if other the (If an effective date is listed, the Note: If the date inserted is document's effective date of	date must be specific and can n this block does not meet	the applicable	ite of filing or more the statutory filing requ	(option on 90 days after fit direments, this d	ing.) Pursua	nt to 605.0207 (3 t be listed as th
the record specifies a c) The 90th day after t		e, but not ar	n effective time,	at 12:01 a.r	m. on the	e earlier of:
Dated/ 2						
***	Signature of a mem	iber or authorize	d representative of a r	nember		
	Jeffrey	EVAN	me of signee			

Page 3 of 3

Filing Fee: \$25.00