L16000004054

(Re	questor's Name)	
(Ad	dress)	
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- (Cit	y/State/Zip/Phone	= #)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	MAIL	
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
1006 Aven		•	*
SUBJECT: <u>·</u>		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Douglas M. DeRosa		
		Name of Person	
		Firm/Company	
	3143 S. Indian River Drive		
	Fort Pierce, FL 34982	Address	
For further information co	malopescado@gmail.com E-mail address: (oncerning this matter, please co	City/State and Zip Code to be used for future annual report noti. all:	fication)
		at ()	
Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration Sec	ction
Division of C P.O. Box 632	orporations	Division of Cor The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1006 Avenue L. LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company	were filed on January 6, 2016	and assigned
lorida document number L16000004054		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
ne new name must be distinguishable and contain the words "Limited Liabi	lity Company " the designation "14 (") or th	e abbreviation 1 C "
ne new name must be distinguishable and contain the words "Limited Liabi"	my company, the designation time of the	= •••
nter new principal offices address, if applicable:		<u></u>
Principal office address MUST BE A STREET ADDRESS)		
		 :
A		2:
nter new mailing address, if applicable:		
lailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered office a tent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new registe
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.

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
Kaitlyn Ann DeRosa		3143 S. Indian River Drive	
		Fort Pierce, F1, 34982	Remove
			□Change
			□Change
			□Add
			Remove
			EChange
			Change NO Add
			Remove
			□ Add
			□Remove
			□Change
			□Add
		<u>.</u>	□Remove
			□ Change

Following amendment, Douglas	M. DeRosa and I	Kaitlyn Ann DeRos	a shall serve as Co-M	anagers	
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ective date, if other than the da effective date is listed, the date must be e: If the date inserted in this block ument's effective date on the Depa	specific and cannot does not meet the	be prior to date of fili e applicable statuto	ng or more than 90 days	after filing.) Pursuant to 60	05.020 sted a
cord specifies a delayed effective d s filed.	ite, but not an eff	ective time, at 12:0	l a.m. on the earlier o	of: (b) The 90th day af	ter th
ed October 27	. 20	20			
2					

Filing Fee: \$25.00