

L16000034905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

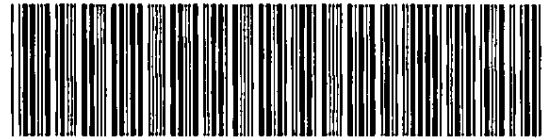
(Document Number)

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17 SEP 25 AM 8:49

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OCT 01 2017

RECEIVED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2017 OCT -2 PM 12:52
TALLAHASSEE, FLORIDA

August 31, 2017

STEPHANIE C GOMEZ
5258 GOLDEN GATE PARKWAY SUITE 107
NAPLES, FL 34116

SUBJECT: STABILIZED STEPS, LLC
Ref. Number: L16000034905

We have received your document for STABILIZED STEPS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 017A00018049

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stabilized Steps, 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:

Stephanie C. Gomez
Name of Person

Stabilized Steps, LLC
Firm/Company

5258 Golden Gate Parkway, Suite 107
Address

Naples, FL 34116
City/State and Zip Code

info@stabilizedsteps.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie C. Gomez at (239) 580-8794
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Stabilized Steps, 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 2/18/2016 and assigned
Florida document number L16000034905.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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.


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>	<u>Address</u>	<u>Type of Action</u>
PRES	Stephanie C. Gomez	5258 Golden Gate Parkway,	<input type="checkbox"/> Add
		Suite 107	<input type="checkbox"/> Remove
		Naples, FL 34116	<input checked="" type="checkbox"/> Change
VP	Eryk Hardwick	5258 Golden Gate Parkway,	<input type="checkbox"/> Add
		Suite 107	<input type="checkbox"/> Remove
		Naples, FL 34116	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 SEP 2011 11:08:45 AM
COMMUNITY DEVELOPMENT
SECTION

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

17 SEP 28 AM 8:45

E. Effective date, if other than the date of filing: _____ (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 September 27, 2017

Eryk Hardwick

Signature of a member or authorized representative of a member

Eryk Hardwick

Typed or printed name of signee