

L16000070470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

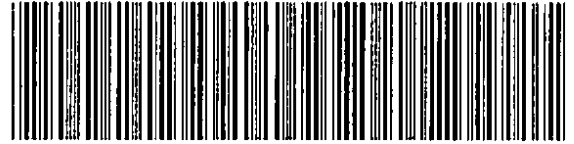
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07/11/23--01004--003 **25.00

FILED
2023 JUL 11 AM 8:02
CLERK OF DISTRICT COURT
TALLAHASSEE, FL 32301

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TAXVANTAGE CONSULTING, 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:

WESLEY MATEJKA

Name of Person

TAXVANTAGE CONSULTING, LLC

Firm/Company

27100 SR 70 E.

Address

Myakka City, FL 34251

City/State and Zip Code

wes@taxvantageconsulting.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WESLEY MATEJKA

941 404-9543
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAXVANTAGE CONSULTING, 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 April 11, 2016 and assigned Florida document number L16000070470.

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 "L.L.C."

Enter new principal offices address, if applicable:

27100 SR 70 E.

(Principal office address MUST BE A STREET ADDRESS)

Myakka City, FL 34251

Enter new mailing address, if applicable:

27100 SR 70 E.

(Mailing address MAY BE A POST OFFICE BOX)

Myakka City, FL 34251

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:

EMMA GOLDBERG

New Registered Office Address:

4260 Adelaar Drive

Enter Florida street address

Sarasota

City

Florida

34240

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.

DocuSigned by:

Emma Goldberg

Changing Registered Agent, Signature of New Registered Agent

FILED
 2023 JUL 11 AM 10:02
 CLERK OF DISTRICT COURT
 TALLAHASSEE, FLORIDA

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> |
|--------------|-------------------|-----------------------|--|
| MGR | WESLEY MATEJKA | 27100 SR 70 E. | <input checked="" type="checkbox"/> Add |
| | | Myakka City, FL 34251 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | MITCHELL L. LEVIN | 1402 Green Cove Road | <input type="checkbox"/> Add |
| | | Winter Park, FL 32789 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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| | | | <input type="checkbox"/> Change |

[illegible]

(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)

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.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00