# L16000095863

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# **COVER LETTER**

10:	Division of C		•	•
SUBJE	1108 Blo	oomingdale, LLC		
SOBJE		Name of Lin	nited Liability Company	
The end	closed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please	return all corres	spondence concerning this matter	to the following:	
		Lindsey Sultan		
			Name of Person	<del></del>
		1108 Bloomingdale, LLC		
			Firm/Company	
		2752 Cypress Head Trail		
		<del> </del>	Address	
		Oviedo, FL 32765		
			City/State and Zip Code	
		lindseybreslow@yahoo.com		<u> </u>
			to be used for future annual report notif	ication)
For fur	ther information	n concerning this matter, please c	all:	
Lindse	y Sultan		407 403-0121	
	Nam	e of Person	Area Code Daytime	e Telephone Number
Enclose	ed is a check fo	r the following amount:		
<b>=</b> \$25	5.00 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/COURIER ADDRESS:
Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1108 Bloomindale, LLC						
(Name of the Limi	ted Liability Compa (A Florida Limited)	iny as it now appears on ou Liability Company)	ır records.)			
The Articles of Organization for this Limited L	iability Company	were filed on <u>05/16/16</u>	and assigned			
Torida document number L16000095863						
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name o	f the limited liab	oility company here:				
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designat	ion "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applic	able:	2752 Cypress Head Tr				
Principal office address MUST BE A STREE	ET ADDRESS)	Oviedo, FL 32765				
		2752 Cypress Head Tr	FIL.			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Oviedo, FL 32765	P III			
			5 E O			
B. If amending the registered agent and registered agent and/or the new registered o	•		(/)			
Name of New Registered Agent:	Lindsey Sultan					
New Registered Office Address:	2752 Cypress I	Head Tr				
		Enter Florida str	ect address			
	Oviedo		, Florida <sup>32765</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	Alan Hoeksema	1710 Palm Ave	Add
		Winter Park, FL 32789	■ Remove
			Change
MGR	Lindsey Sultan	2752 Cypress Head Tr	<b>∃</b> Add
	<del></del>	Oyiedo, FL 32765	□ Remove
			Change
			Add  16 ORT 20 Change  DIVISION OF CORE COVIDERS
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e record specif The 90th day	ies a delayed after the reco	effective of ord is filed.	date, but n	ot an effect	tive time, at 1	l2:01 a.m.	on the earlie	er o
October 18			, 2016	·				

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Filing Fee: \$25.00