

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

L16000108907

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : LAW OFFICES OF MICHAEL A. HALBERG, P.A.  
Account Number : 120100000044  
Phone : (954)252-0589  
Fax Number : (954)320-4555

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: mike@southfloridalaw.net

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**STONELINE TAMPA LLC**

Certificate of Status	0
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2022 APR -4 PM 3:46

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stoneline Tampa 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 June 17, 2009 and assigned Florida document number L16000108907.

This amendment is submitted to amend the following:

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

Stoneline Jacksonville LLC

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

**Enter new principal offices address, if applicable:**

3540 NW 72nd Avenue

**(Principal office address MUST BE A STREET ADDRESS)**

Miami, FL 33122

**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:

Law Offices of Michael A. Halberg, P.A.

New Registered Office Address:

1301 International Parkway, Suite 120

Enter Florida street address

Ft. Lauderdale

City

Florida

33323

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.*

*Michael Halberg, Esq.*

If Changing Registered Agent, Signature of New Registered Agent

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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>
C	Roberto Rivera	3540 NW 72nd Avenue	<input type="checkbox"/> Add
		Miami, FL 33312	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Robert Serrone	1401 Sawgrass Corporate Parkway	<input type="checkbox"/> Add
		Sunrise, FL 33323	<input checked="" type="checkbox"/> Remove
			<input 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"/> Remove
			<input type="checkbox"/> Change

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

[illegible]

**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 April 4, 2022

Yorkam Glen Si

Signature of a member or authorized representative of a member

Gorkem Yener

Typed or printed name of signer

**Filing Fee: \$25.00**