

L160000129444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

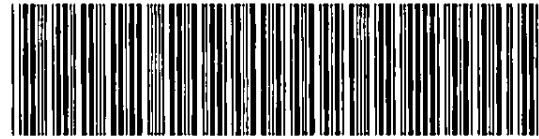
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 AUG 24 AM 11:49
TALLAHASSEE, FLORIDA

AUG 25 2017

Y. CULKER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Finish & More 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:

Sabino Cruz Silvestre

Name of Person

Finish & More

Firm/Company

3540 Coronado Dr Apt 504

Address

Sarasota Florida 34231

City/State and Zip Code

finishandmore@gmail.com

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

For further information concerning this matter, please call:

Sabino Cruz Silvestre

941

822-3692

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Finish & More 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 July 08, 2016 and assigned
Florida document number L16000129444.

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:

(Principal office address MUST BE A STREET ADDRESS)

3205 Bee Ridge Rd

#34

Sarasota Florida 34239

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O Box 15812

Sarasota Florida 34277

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:

Rebecca Cruz Silvestre

New Registered Office Address:

3205 Bee Ridge Rd #34

Enter Florida street address

Sarasota

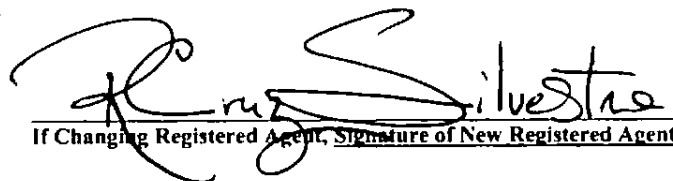
Florida 34239

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 attending 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 | Natallie D. Pecina | 3402 Coronado Dr Apt 2215 | <input checked="" type="checkbox"/> Add |
| | | Sarasota Florida 34231 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Trinity Gibson | 3402 Coronado Dr Apt 2215 | <input checked="" type="checkbox"/> Add |
| | | Sarasota Florida 34231 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Antonio Cruz Silvestre | 5715 Granada Apt 299 | <input checked="" type="checkbox"/> Add |
| | | Sarasota Florida 34231 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
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CLARK COUNTY FLORIDA
AUG 4 AM 11:40

17 AUG 84 AM 11:49
U.S. DEPT. OF JUSTICE
FBI - MIAMI
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08-17-2001 BY 60322
UCBAW

17 AUG 84 AM 11:49
ALLIANCE, FLORIDA

(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~~

Sabino Cruz Silvestre

Typed or printed name of signee

Filing Fee: \$25.00