116000135468

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FILED 2020 FEB 11 PH 5: 21

Amend

FEB 1 1 2020 I ALBRITTON

COVER LETTER

CUD IF CT.	Lander Asso	ciates LLC	·	
Name of Limited Liability Company				
The enclose	ed Articles of A	Amendment and fee(s) are subr	mitted for filing.	
Please retur	n all correspon	dence concerning this matter t	to the following:	
		Jill DiSalvo		
			Name of Person	
		DiSalvo & Associates		
Firm/Company 1760 N. Jog Road, Suite 150				
Address West Palm Beach, FL 33411 City/State and Zip Code			Address	
			.	
		JDiSalvo@D-acpa.com		
		E-mail address: (t	o be used for future annual report notif	ication)
For further	information co	ncerning this matter, please ca	ill:	
Jill DiSalvo)		561 659-1177 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	e 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

TO:

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



January 29, 2020

JILL DISALVO DISALVO & ASSOCIATES 1760 N. JOG ROAD - STE. 150 WEST PALM BEACH, FL 33411

SUBJECT: LANDER ASSOCIATES LLC

Ref. Number: L16000135468

We have received your document for LANDER ASSOCIATES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6050.

Irene Albritton Regulatory Specialist II

2020 FEB 11 FM 12

Letter Number: 320A00002170

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

, A D.T			TION	4 25
ARI	ICLES OF OI OF		HON	
	Or	`		and assigned
Lander Associates, LLC				
	ited Liability Compan (A Florida Limited Li	y as it now appea	rs on our records.)	
	(A Florida Limited Li	ability Company)		(a) (c)
The Articles of Organization for this Limited 1	Liability Company v	vere filed on $\frac{7}{2}$	19-2016	and assigned
Florida document number L16000135468				O.
	·			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liabil	ity company h	ere:	
,				
The new name must be distinguishable and contain the	words "Limited Liabilit	y Company," the	designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if appli				<u> </u>
Principal office address MUST BE A STRE	ET ADDRESS)			
		(3/0 N. I. D.		
Enter new mailing address, if applicable:		1760 N Jog Ro	au	
(Mailing address MAY BE A POST OFFICE BOX)		Suite 150		
		West Palm Bea	ich. FL 33411	
B. If amending the registered agent and			n our records,	enter the name of the new
registered agent and/or the new registered of	omce address here:			
	DFS Agent LLC			
Name of New Registered Agent:			.	
New Registered Office Address:	1760 N. Jog Roa			
		Enter Flo	orida street address	
	West Palm Beach		, Flor	rida <u>33411</u>
		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

Page 1 of 3

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>	Type of Action
AMBR	Lemuria Gomez	431 Executive Center Drive Apt 213	■ Add
		West Palm Beach, FL 33401	_□ Remove
			Change
			Add
			Remove
			Change
			□ Add
			Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			Add
			☐ Remove
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		-	
			□ Remove
			Change

	·
-	
-	
<u> </u>	
Effective date	e, if other than the date of filing:
Note: If the da	te is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 ate inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a fective date on the Department of State's records.
	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of day after the record is filed.
Dated	comber 26. 2019.
_	Signature of a member or authorized representative of a member
	Authorized Representative Typed or printed name of signee

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Filing Fee: \$25.00