

**L16000162620**

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

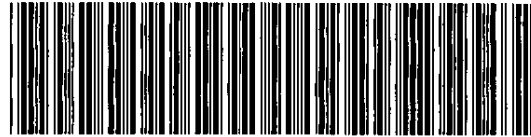
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**FILED**  
**16 NOV -7 AM 9:54**  
DIVISION OF CORPORATIONS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ALOHA POOLS OF PORT CHARLOTTE, LLC.

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL R. VERBANIC  
Name of Person

ALOHA POOLS OF PORT CHARLOTTE LLC.  
Firm/Company

42 Pepe Court  
Address

PUNTA GORDA, FL. 33983  
City/State and Zip Code

Verbanicdary1@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DANIEL R. VERBANIC at (941) 661-9334  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

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

ALOHA POOLS OF Port CHARLOTTE. 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 August 30 and assigned Florida document number L16000162620

This amendment is submitted to amend the following:

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

N/A  
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)

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:

New Registered Office Address:

MICHAEL Philip LETZELTER

42 PEPE COURT PUNTA GORDA

Enter Florida street address

PUNTA GORDA, Florida FL. 33983

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.

Michael P. Letzelter

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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>MICHAEL P. LETZELER</u>	<u>NEW Manager of</u>	<input checked="" type="checkbox"/> Add
		<u>LLC.</u>	<input type="checkbox"/> Remove
		<u>Manager</u>	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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16 NOV 7 AM 9:51  
DIVISION OF CLERK & COMPTROLLER'S

FILED

16 NOV  
DIVISION OF CONSUMER AFFAIRS

FILED  
APR 9: 54  
7 - APR 9  
COMMUNICATIONS SECTION

**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.

Dated 10/31/2016

Signature of a member or authorized representative of a member

SANYI R. VENBATIC  
Typed or printed name of signee

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: ALOHA POOLS OF PORT CHARLOTTE LLC.
2. (a) 42 PEPE COURT, PGT, FL. 33983 (b) 42 PEPE COURT PUNTA GORDA, FL.  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. AUG 30, 2016 Date of filing/registration in Florida 4. L16000162620 Document number

5. (a) DARYL R. VERBANIC  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

42 PEPE COURT  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
42 Pepe Court  
PUNTA GORDA, FL 33983

- (b) MICHAEL R. LETZELTER  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

L  
NEW Registered Office Address:

42 Pepe Court  
PUNTA GORDA, FL 3398

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Daryl R. Verbanic  
Signature of a member or authorized representative of a member

DARYL R. VERBANIC  
Printed or typed name of signee

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 R. Letzelter  
Signature of Registered Agent