

# L16001187894

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From:  
Account Name : TAVISTOCK GROUP  
Account Number : 120130000052  
Phone : (407)909-9957  
Fax Number : (407)909-9984

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PIER 66 FINANCING, LLC

Certificate of Status	0
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17 JUN 22 PM 2:16

DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
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17 JUN 22 AM 9:03  
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Help



June 22, 2017

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

PIER 66 FINANCING, LLC  
9350 CONROY WINDERMERE ROAD  
WINDERMERE, FL 34786

SUBJECT: PIER 66 FINANCING, LLC  
REF: L16000187894

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6051.

Yasemin Y Sulker  
Regulatory Specialist II

FAX Aud. #: H17000164912  
Letter Number: 517A00012657

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Pier 66 Financing, 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:

Michelle Dadisman

\_\_\_\_\_  
Name of Person

Tavistock Group

\_\_\_\_\_  
Firm/Company

9350 Conroy Windermere Road

\_\_\_\_\_  
Address

Windermere, FL 34786

\_\_\_\_\_  
City/State and Zip Code

michelle.dadisman@tavistock.com

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

For further information concerning this matter, please call:

Michelle Dadisman

at ( 407 ) 909-9957

\_\_\_\_\_  
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

# TO ARTICLES OF ORGANIZATION OF

Pier 66 Financing, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

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 DIVISION OF CORPORATIONS  
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The Articles of Organization for this Limited Liability Company were filed on October 11, 2016 and assigned  
Florida document number L16000187894

This amendment is submitted to amend the following:

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

Sails Ventures, LLC

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:

6900 Tavistock Lakes Blvd., Suite 200

(Principal office address MUST BE A STREET ADDRESS)

Orlando Florida 32827

Enter new mailing address, if applicable:

6900 Tavistock Lakes Blvd., Suite 200

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, Florida 32827

**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:

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_  
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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

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

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E. Effective date, if other than the date of filing: June 21, 2017 (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**

June 21, 2017

Signature of a member or authorized representative of a member

Thomas B. Youth, Manager

Typed or printed name of signee