## 116000196084

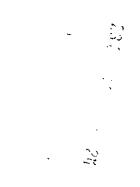
(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Decomposition)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
opecial instructions to 1 ling Onicer.
-
.* *
L_3 (4)

Office Use Only



400418354934

11/07/23--01017--017 \*\*80.00





December 6, 2023

CHRISTINE OSHEA 514 POINSETTIA ROAD MELBOURNE BEACH, FL 32951 US

SUBJECT: TADAJERE LLC Ref. Number: L16000196084

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

YOU CAN NOT HAVE TWO SUFFIXES, YOU ONLY CAN HAVE ONE. PLEASE UPDATE.

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.

Letter Number: 123A00027786

Jasmine N Horne Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

Division of Co				
Tadajere, I	LLC			
JOBSECT.	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return all correspondent	ondence concerning this matter	r to the following:		
	Mark Nyquist			
		Name of Person		
	High Surf			
		Firm/Company	<del></del>	
	330 5th Avenue			
		Address		
	Indialantic, FL 32903			
		City/State and Zip Code	<u></u>	
	crew@highsurfcorp.com			
The firsther information of		(to be used for future annual report not	ification)	
	concerning this matter, please o			
Mark Nyquist		321 505-0123 Area Code Daytin		
Name e	of Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	he 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 Addres Registration S		<u>Street Address:</u> Registration Sc	ction	
Division of C	Corporations	Division of Con	Division of Corporations	
P.O. Box 632		The Centre of 7		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Tadajere, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	pany as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L16999196084	y were filed on 10/24/2016 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
High Surf, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	High Surf, LLC	
(Principal office address MUST BE A STREET ADDRESS)	330 5th Avenue	
······································	Indialantic, Florida 32903	
Enter new mailing address, if applicable:	High Surt, LLC	
(Mailing address MAY BE A POST OFFICE BOX)	330 5th Avenue	
	Indialantic, Florida 32903	
B. If amending the registered agent and/or registered office and and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	,	
	Enter Florida street address	
	, Florida	
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code	
hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete	ee to act in this capacity. I further agree to comply with	

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			ПРеточе
			□Change
		4	□Add
		<u>-</u>	□Remove
			Change
<del></del>			□Add
			□Remove
			□Change
<del></del>			□Add
			□Rcmove
			□Change
			□Add
			□Remove
			□Change
			□ Remove
			□Change

<del></del>		
· · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·		
***		
<del></del>		
	<del></del>	
	_	
ffective date, if other than the an effective date is listed, the date multiple: If the date inserted in this blocument's effective date on the D	oer goes not meet ale applicable statutory	(optional) gor more than 90 days after filing.) Pursuant to 605.0207 of filing requirements, this date will not be listed as t
record specifies a delayed effectiv l is filed.	e date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
ated October 20.	2023	<del>.</del> .
	1	
	Signature of a member or authorized represen	

Filing Fee: \$25.00