

From:

04/05/2019 11:28

#453 P.001/005

L17000147534

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 : NAJMY THOMPSON, P.L.
Account Number : 120090000014
Phone : (941)907-3959
Fax Number : (941)840-5559

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

Email Address: cri.Frank@yahoo.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
522 68TH STREET LLC

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T.G.
04/08/19

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 522 68th Street 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:

Lori F. Schlossberg

Name of Person

Firm/Company

8023 Marina Isles Lane

Address

Holmes Beach, FL 34217

City/State and Zip Code

lori.frank@yahoo.com

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

For further information concerning this matter, please call:

Lori F. Schlossberg

404

432-2501

Name of Person

at ()

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

SECRETARY OF STATE
TALLAHASSEE, FL 32301

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

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522 68th Street 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 2/22/2018 and assigned
Florida document number 117000147534

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)

8023 Marina Isles Lane

Holmes Beach, FL 34217

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8023 Marina Isles Lane

Holmes Beach, FL 34217

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: Lori F. Schlossberg

New Registered Office Address: 8023 Marina Isles Lane

Enter Florida street address

Holmes Beach

Florida 34217

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

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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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Lori F. Schlossberg	8023 Marina Isles Lane	<input type="checkbox"/> Add
		Holmes Beach, FL 34217	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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Dated

4-4-19

Lin F. Schwedes

Signature of a member or authorized representative of a member

Lori F Schlossberg
Typed or printed name of signee

Typed or printed name of signee

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