## 118000059486

| (Re                     | equestor's Name)   |                 |
|-------------------------|--------------------|-----------------|
| (Ad                     | dress)             |                 |
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| (Cit                    | ry/State/Zip/Phone | <del>= #)</del> |
| PICK-UP                 | ☐ WAIT             | MAIL            |
| (Bu                     | siness Entity Nan  | ne)             |
| (Do                     | cument Number)     |                 |
| Certified Copies        | _ Certificates     | of Status       |
| Special Instructions to | Filing Officer:    |                 |
|                         |                    |                 |
|                         |                    |                 |
|                         |                    |                 |

Office Use Only

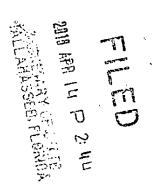


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**Division of Corporations** 

April 18, 2018

EUGENE JAMROZ 1108 HIGHLAND BEACH DR #3 HIGHLAND BEACH, FL 33487

SUBJECT: ISLAND PARADISE 3301 LLC

Ref. Number: L18000059486

We have received your document for ISLAND PARADISE 3301 LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FL CORP, but your entity is a FL LLC. Please complete and return the enclosed blank form(s).

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 118A00007851

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www.sunbiz.org

## COVER LETTER

| TO: Registration Section Division of Corpor |  |  |
|---|--|--|
| SUBJECT:                                    | ISCANO PARADISE 3301 LLC Name of Limited Liability Company   |  |
| The enclosed Articles of Am                 | endment and fee(s) are submitted for filing.   |  |
| Please return all corresponde               | ence concerning this matter to the following:  |  |
|   | EVGENE JAMROT Name of Person   |  |
|   | (Author) Cooli   |  |
|   | Firm/Company   |  |
|   | 1108 HIGHLAND BEACH DR #3  |  |
|   | Address  |  |
|   | HIGHLAND BOACH, FLA 33487  |  |
| _   | Ciry/State and Zip Code  M VOGEL 717 & Bell South, Net  E-mail address: (to be used for future annual report notification) |  |
|   | E-mail address: (to be used for future annual report notification  | on)  |
| For further information conc                | erning this matter, please call:   |  |
| EUGENE JAMI                                 | ec7 at (S6) 213-31   | ephone Number.   |
| Hame of Fe                                  | 15011 Alba Code Daynine For  |  |
| Enclosed is a check for the f               | ollowing amount:   | TO TO  |
|   | ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)           | 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ISCAND PARI   | 7015E 3301 LLC  |                        |             |
|---|---|------------------------|-------------|
| (Name of the Limited Liability Co   | ompany as it now appears on our records ited Liability Company) | <u>J</u>               |             |
| The Articles of Organization for this Limited Liability Comp.  Florida document number                                  | pany were filed on3/6/201                                       | and ass                | signed      |
| This amendment is submitted to amend the following:   |   |                        |             |
| A. If amending name, enter the new name of the limited  | liability company bossy   |                        |             |
| A. It afficulting frame, enter the new frame of the finited   | nabinty company nere:   |                        |             |
| The new name must be distinguishable and contain the words "Limited I   | 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  | <u> </u>  |                        |             |
|   |   |                        |             |
| P   |   |                        |             |
| Enter new mailing address, if applicable:   |   |                        |             |
| (Mailing address MAY BE A POST OFFICE BOX)  |   |                        |             |
|   |   |                        | <del></del> |
| B. If amending the registered agent and/or registere  | d affice address on our records                                 | antar the name         | of the new  |
| registered agent and/or the new registered office address   |   | enter the name         | or the nev  |
|   |   | 55 <u>65</u>           |             |
| Name of New Registered Agent:   |   |                        |             |
| New Registered Office Address:  |   |                        | un rock     |
| Ten registros grandos.  | Enter Florida street address                                    | 222 =                  | 1 2727      |
|   | , Flo   | rida 💆 📆               | i g i       |
|   | City  | Zip Code               | Control     |
| New Registered Agent's Signature, if changing Registered Ag   | ent:  | <b>高斯 声</b>            |             |
| I hereby accept the appointment as registered agent and   |   |                        |             |
| provisions of all statutes relative to the proper and comp<br>accept the obligations of my position as registered agent |   | -                      |             |
| being filed to merely reflect a change in the registered of   |   |                        |             |
| company has been notified in writing of this change.  | •   |                        |             |

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 = N $AMBR = A$ | Manager<br>Authorized Member |  |                |
|--------------------|------------------------------|--|----------------|
| <u>Title</u>       | Name                         | Address  | Type of Action |
| MGR                | JANUSZ TROSZKIEU             | NCZ 1108 HIGHLAND REACH                                      | 🗆 Add          |
|                    |                              | HIGHLAND REACH HIGHLAND REACH HIGHLAND REACH, FLA            | Remove         |
|                    |                              |  | Change         |
| MAR                | JMJ REENERFY LL              | C 1108 HIGHLAND BEACH  | Add            |
|                    |                              | C 1108 HIGHLAND BOACH  OR APT #3  HIGHLAND BOACH, FUR  33187 | Remove         |
|                    |                              |  | Change         |
|                    |                              |  |                |
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| ective date, if other than the date of filing:  | (optional)  |
| n effective date is listed, the date must be specific and cannot be prior to date te: If the date inserted in this block does not meet the applicable s | e of filing or more than 90 days after filing.) Pursuant to 605.0 statutory filing requirements, this date will not be listed |
| cument's effective date on the Department of State's records.   | , <b>g</b> . <b>1</b>   |
|   |   |
| record specifies a delayed effective date, but not an   | effective time, at 12:01 a.m. on the earlier  |
| he 90th day after the record is filed.  |   |
| - artializ  |   |
| led 1/4 05/07/18  |   |
|   |   |
|   | representative of a member  |
| Signature of aftember or authorized   | ichicochianive of a memori  |

Page 3 of 3

Filing Fee: \$25.00