

418000075507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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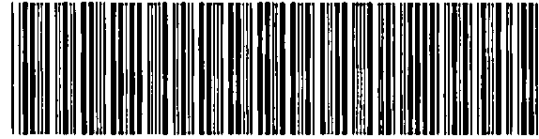
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bridge House of Palm Beach 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:

Charles M. Lax, Esq.

Name of Person

MADDIN, HAUSER, ROTH & HELLER, P.C.

Firm/Company

28400 Northwestern Highway, Second Floor

Address

Southfield, Michigan 48034

City/State and Zip Code

tspina@spinaelectric.com

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

For further information concerning this matter, please call:

Charles M. Lax, Esq.

Name of Person

at (248)

Area Code

827-1877

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

Bridge House of Palm Beach LLC

Page 1 of 3

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>
AMBR	Elizabeth Deluca Spina Revocable Living Trust Agreement dated 12/9/1981, as may be amended	13967 Chester Bay Lane North Palm Beach, Florida 33408	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Timothy A. Spina Revocable Living Trust Agreement dated 12/9/1981, as may be amended	13967 Chester Bay Lane North Palm Beach, Florida 33408	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

4-3 OCT 29 F 8 46

11.10.29 F 3.40

E. Effective date, if other than the date of filing: _____ (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.

(b) The 90th day after the record is filed.

Dated October 23, 2018

Trinity A. Davis
Signature of a member

Signature of a member or authorized representative of a member

TIMOTHY A. SPINA

Typed or printed name of signee