

L18000093478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

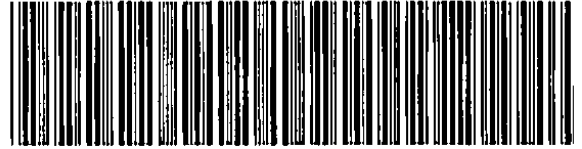
(Business Entity Name)

(Document Number)

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2020 JUN 18 AM 8:05

AUG 03 2020  
S. YOUNG

TO: Registration Section  
Division of Corporations

SUBJECT: LAX HOUSE, 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:

DANIEL SOVIERO

Name of Person

SIGNATURE LACROSSE, LLC

Firm/Company

114 Columbia Drive, Unit 1

Address

Tampa, FL 33606

City/State and Zip Code

soviero@signaturelacrosse.com

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

For further information concerning this matter, please call:

Daniel Soviero

561

212-9284

at ( )

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

TO  
ARTICLES OF ORGANIZATION  
OF

LAX HOUSE, 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 April 13, 2018 and assigned

Florida document number 118000093478.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida 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</u>
MGR	ANDREW GILLILAND	1025 W. INDIANTOWN ROAD	<input type="checkbox"/> Add
		JUPITER, FL 33458	<input checked="" type="checkbox"/> Rem
			<input type="checkbox"/> Char
MGR	DANIEL SOVIERO	114 COLUMBIA DRIVE, UNIT 1	<input checked="" type="checkbox"/> Add
		TAMPA, FL 33606	<input type="checkbox"/> Rem
			<input type="checkbox"/> Char
			<input type="checkbox"/> Add
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(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

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.

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

Dated JUNE 9, 2020

Signature of a member or authorized representative of a member

DANIEL SOVIERO

Typed or printed name of signee