

LI8000122188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

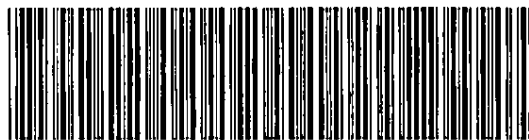
(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF FLORIDA
TALLAHASSEE, FL

2019 JAN 31 PM 12:57

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 8, 2019

RACHEL ROSE DANZI
1352 SHEFFIELD WAY
FORT MYERS, FL 33919

SUBJECT: RACHEL ROSE REAL ESTATE LLC
Ref. Number: L18000122188

We have received your document for RACHEL ROSE REAL ESTATE 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 Florida Corporation, but your entity is a Florida Limited Liability Company. 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.

Sterling R Abney
Regulatory Specialist II

Letter Number: 619A00000463

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RACHEL ROSE REAL ESTATE 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:

RACHEL ROSE DANZI

Name of Person

Firm/Company

1352 SHEFFIELD WAY

Address

FORT MYERS, FL 33919

City/State and Zip Code

RACHELROSE239@GMAIL.COM

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

For further information concerning this matter, please call:

RACHEL ROSE DANZI

at (239) 910-3379

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2019.11.21 PM 1:35

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

RACHEL ROSE REAL ESTATE 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 05/16/2018

Florida document number L18000122188

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

RACHEL ROSE REALTY LLC

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)

6151 ESTERO BLVD #5

FORT MYERS BEACH, FL 33931

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6151 ESTERO BLVD #5

FORT MYERS BEACH, FL 33931

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:

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

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2019 JAN 31 PM 12:57
TALLAHASSEE, FL

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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

[illegible]

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 JANUARY 23, 2019

Nikhil Rose Day
Signature of a member or authorized agent

RACHEL ROSE DANZI

Typed or printed name of signee

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Filing Fee: \$25.00

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2019 JAN 31 PM 12:57
CLERK OF DISTRICT COURT
TALLAHASSEE, FL