

L18000 148 170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

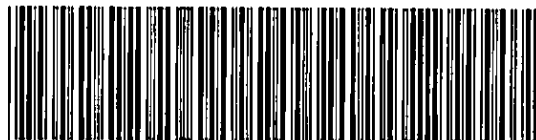
(Business Entity Name)

(Document Number)

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09/19/19--01015--033 **25.00

FILED
2019 SEP 16 PM 3:30
TALLAHASSEE, FL

SEP 27 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HARBOR HOME SWF 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:

ANTHONY RENNE

Name of Person

HARBOR HOME SWF LLC

Firm/Company

173 N WATERWAY DRIVE NW

Address

PORT CHARLOTTE, FLORIDA 33952

City/State and Zip Code

HARBORHOMESWFL@GMAIL.COM

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

For further information concerning this matter, please call:

ANTHONY RENNE

239 253 5900
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

HARBOR HOME SWF LLC
173 N WATERWAY DRIVE NW
PORT CHARLOTTE, FLORIDA 33952
239.253.5900

09/12/2019

FLORIDA DEPARTMENT OF STATE
PO BOX 6327
TALLAHASSEE, FLORIDA 32314

RE: L18000148170

Please find the attached Articles of Amendment for our company listed above.

I have corrected the names of two members as follows:
Douglas Arthur Joseph Mc Coy Jr.
Michael John Hobby

We have also added Timothy L Pucci as AMBR to the LLC.

Thanking you in advance.

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

HARBOR HOME SWF 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 06/15/2018 and assigned
Florida document number L18000148170.

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)

FILED
2019 SEP 16 PM 3:30
TALLAHASSEE, FL
SECRETARY OF STATE

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



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	TIMOTHY L PUCCI	182 FRANCES DR PORT CHARLOTTE, FL 33952	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MICHAEL JOHN HOBBY	6 PEBBLE BEACH ROAD ROTONDA, FL 33947	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		CORRECT NAME	<input checked="" type="checkbox"/> Change
AMBR	DOUGLAS AUTHUR JOSEPH MC COY JR	184 MARINER LANE ROTONDA FL 33947	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		CORRECT NAME	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

We have corrected Douglas Arthur Joseph McCoy name as it was misspelled.

We have corrected Michael John Hobby name from Michael David which was incorrect.

We have added Timothy L. Pucci AMBR to the LLC

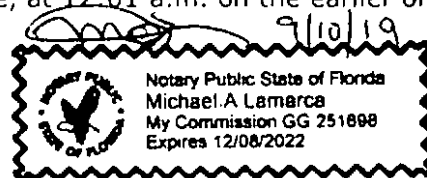
E. Effective date, if other than the date of filing: _____ **(optional)**

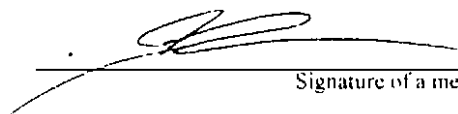
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated Sept 10, 2019





Signature of a member or authorized representative of a member

Anthony J Renne

Typed or printed name of signee