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S. YOUNG

COVER LETTER

	ration Se n of Cor	ction porations		
	ondos Bea	ach Properties LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed Ar	ticles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all	correspo	ndence concerning this matter	to the following:	
		Derek Michaloski		
			Name of Person	
		Mondos Beach Properties		
			Firm/Company	
		499 Richard Jackson Blvd		
			Address	
		Panama City Beach Florida	32407	
		jamescpa@panhandletaxres	City/State and Zip Code olution.com	
		E-mail address: ()	to be used for future annual report notif	lication)
For further infor	mation co	oncerning this matter, please ca	dl:	
James C Taylor	CPA		404 918-1212 at ()	
	Name of	Person		e Telephone Number
Enclosed is a ch	eck for th	e following amount:		
■ \$25.00 Filin	g 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:

TO:

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

Mondos Beach Properties 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 Lia Florida document number <u>L18000268533</u>		were filed on $\frac{1}{2}$	1/16/2018	To had assigned
Florida document number	·			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company	<u>here</u> :	
The new name must be distinguishable and contain the we	ords "Limited Liabil	ity Company," the	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	hle:	499 Richard Ja	ackson Blvd	
(Principal office address MUST BE A STREET ADDRESS)		Panama City Beach, FL 32407		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		499 Richard Ja Panama City I	ackson Blvd Beach FL 32407	
B. If amending the registered agent and/or registered agent and/or the new registered off	ice address hero	<u>e</u> :	on our records, <u>ente</u>	r the name of the new
Name of New Registered Agent:	James C Taylor	CPA		
New Registered Office Address:	220 George C V	Vallace Blvd		
	-1	Enter Fl	lorida street address	
	Panama City Be	each	Florida ³	2413
	·	City		Zip Code
New Registered Agent's Signature, if changing R	egistered 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.

Changing Registered Agent, Signature of New Registered Agent

Page Nof 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

James Vaught 7833 Mcclvey Rd MBR Panama City Beach FL 32408	
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ffective date, if other than an effective date is listed, the date lote: If the date inserted in the ocument's effective date on t	e must be specific and cam its block does not meet	the applicable statuto	ing or more than 90 da		
e record specifies a dela The 90th day after the		, but not an effec	ctive time, at 12	:01 a.m. on the e	arlier d
November 8th	20)19			
	1//	~			
	/////////////////////////////////////	~	entative of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00