

L190000122154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

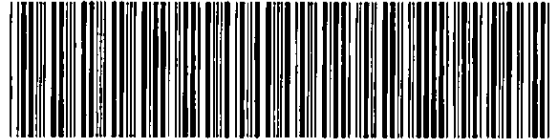
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/21/23--01020--024 **50.00

2023 SEP 21 AM 7:35

cf 10/4/2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sarasota Italian Properties, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Feinberg

Name of Person

Sarasota Italian Properties, LLC

Firm/Company

24705 83rd Ave, E.

Address

Myakka City, FL 34251

City/State and Zip Code

dfenberg@comcast.net

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

For further information concerning this matter, please call:

David Feinberg

603 493-1696

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

September 8, 2023

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Amendment of Articles of Organization for **Sarasota Italian Properties, LLC** and **Sarasota Italian Garage, LLC**

To whom it may concern:

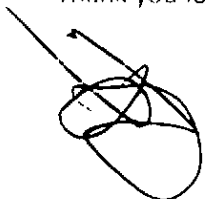
Enclosed please find completed amendments of Articles of Organization for **Sarasota Italian Properties, LLC** and **Sarasota Italian Garage, LLC**.

Enclosed is a check in the amount of \$50 to cover these filings.

Any questions should be directed to David Feinberg, (603) 493-1696. The return address is:

David Feinberg
24705 83rd Ave. E.
Myakka City, FL 34251

Thank you for your prompt attention to this matter.

A handwritten signature in black ink, appearing to be "David Feinberg", written over a circular stamp or seal.

David Feinberg

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

Sarasota Italian Properties, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2023 SEP 21 AM 7:36

The Articles of Organization for this Limited Liability Company were filed on 05/06/2019 and assigned
Florida document number 119000122154.

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 "LLC."

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 registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____

City

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

[illegible]

[illegible]

(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.

Dated September 8 2023

Signature of _____

Signature of a member or authorized representative of a member

David Fenberg

Typed or printed name of signee

Filing Fee: \$25.00