

L19000126433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

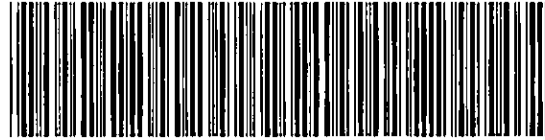
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 OCT 19 PM 5:45

Amend

NOV 19 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELDER'S ISLAND
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:

Raymond Jean
Name of Person

ELDER'S ISLAND
Firm/Company

3374 NW 27th Ter
Address

Boca Raton FL 33434
City/State and Zip Code

Allservices600@gmail.com
E-mail address: (to be used for future annual report notification)

FILED
STATE DEPT. OF CORPORATIONS
20 OCT 19 PM 5:45

For further information concerning this matter, please call:

Raymond Jean at (954) 348-8586
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

EDLER'S ISLAND LLC

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

FILED
STATE OF FLORIDA
20 OCT 19 PM 5:45
INTEGRATED CLERK OF COURTS

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned

Florida document number L 19000126433

This amendment is submitted to amend the following:

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

ELDER'S ISLAND 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)

11270 NW 52nd st
CORAL SPRINGS FL 33076

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11270 NW 52nd st
CORAL SPRINGS FL 33076

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:

RAYMOND JEAN

New Registered Office Address:

11270 NW 52nd st

Enter Florida street address

CORAL SPRINGS

City

Florida

33076

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.

Raymond Jean

If Changing Registered Agent, Signature of New Registered Agent

