

LP 000176408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600438484276

10/29/24--01012--012 **00.00

FILED

2024 OCT 29 PM 4: 28

SECRETARY OF STATE
TALLAHASSEE, FL

ML

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLOODEX 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:

RYAN BLUMBERG

Name of Person

FLOODEX LLC

Firm/Company

76 BUNKER RD

Address

ROTONDA WEST, FL 33947

City/State and Zip Code

omniImarine@comcast.net

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

For further information concerning this matter, please call:

RYAN BLUMBERG

941 232-4570
at ()
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL

2024 OCT 29 PM 4: 28

FILED

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

FLOODEX 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 07/09/2019 and assigned
Florida document number L19000176408.

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)

2024 OCT 29 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CURLEY, KEVIN	76 BUNKER RD	<input type="checkbox"/> Add
		ROTONDA WEST, FL 33947	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	KYLE, DANIEL ARTHUR	9329 ANITA AVE A	<input type="checkbox"/> Add
		ENGLEWOOD, FL 34224	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
VP	CURLEY, BEVERLY ANN	76 BUNKER RD	<input type="checkbox"/> Add
		ROTONDA WEST, FL 33947	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BLUMBERG, RYAN	2640 S MCCALL RD	<input checked="" type="checkbox"/> Add
		ENGLEWOOD, FL 34224	<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

2024 OCT 29 PM 4: 28
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

SECRETARY OF STATE
TALLAHASSEE, FL

SECRETARY OF STATE
TALLAHASSEE, FL

2024 OCT 29 PM 4: 28

7
1
1
1
1

(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)

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 OCTOBER 22 2024

[Signature]
Signature of a member of the

Signature of a member or authorized representative of a member

RYAN BLUMBERG

Typed or printed name of signee

Filing Fee: \$25.00