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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : TILLET ALVARADO & PRENDERGAST  
Account Number : I20210000002  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION  
5444 AMY LANE LLC

Certificate of Status	0
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Page Count	06
Estimated Charge	\$52.50

## COVER LETTER

**TO: Registration Section**  
**Division of Corporations**

**SUBJECT:** 5444 Amy Lane, 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:

Zachary E. Boelkow

Name of Person

5444 Amy Lane LLC

Firm/Company

1811 Latelia Ct

Address

Trinity, FL 34655

City/State and Zip Code

CLYDEONETIME@HOTMAIL.COM

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

For further information concerning this matter, please call:

Zachary E. Boelkow

727 919-0608  
 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5444 Amy Lane 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 09/13/2019 and assigned  
Florida document number L19000232253.

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)

**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	Zachary E. Boelkow	1811 Letelia Ct	<input type="checkbox"/> Add
		Trinity, FL 34655	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Zachary E. Boelkow Trust Agreement	1811 Letelia Ct	<input checked="" type="checkbox"/> Add
		Trinity, FL 34655	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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