119000260540

Office Use Only



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A. **BUTLER** FEB - 4 2022

COVER LETTER

TO:	Registration Sec Division of Corp		•	4			
		ISITIONS LLC					
SUBJECT:Name of Limited Liability Company							
The e	nclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.				
Please	e return all correspon	ndence concerning this matter	to the following:				
		CHARLES L STARR					
			Name of Person				
		212 ACQUISITIONS LLC					
	Firm/Company						
	4030 GULF OF MEXICO DRIVE						
	Address						
		LONGBOAT KEY, FL 34	228				
	City/State and Zip Code						
		LSTARR@RIA.COM					
		E-mail address: (to be used for future annual report notifi	cation)			
For fu	erther information co	oncerning this matter, please ca	all:				
KAROLINA WIECZOREK			941 387-1200 at ()				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclo	sed is a check for th	e following amount:					
□ \$2	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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

212 ACQUISITIONS LLC		يولونيون .ــــــــــــــــــــــــــــــــــــ	. '.
(<u>Name of the Limited Liability C</u> (A Florida Lir	ompany as it now appear nited Liability Company)	s on our records.	FI
he Articles of Organization for this Limited Liability Com	pany were filed on $\frac{1/2}{2}$	21/2022	and assigned
orida document number L19000260540			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited	I liability company he	ere:	
he new name must be distinguishable and contain the words "Limited	Liability Company," the d	esignation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		<u></u>	
Principal office address MUST BE A STREET ADDRES	<u></u>		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or register egistered agent and/or the new registered office addres	ed office address on s here:	our records, <u>e</u>	nter the name of the
Name of New Registered Agent:	<u> </u>	-	
New Registered Office Address:	Enter Flor	ida street address	
		, Florid	aZip 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>	Type of Action
MGR	COLLINS, WENDY	4030 GULF OF MEXICO DRIVE	Add
		LONGBOAT KEY, FL 34228	Remove
			Change
MGR	Charles L Starr	4030 GULF OF MEXICO DRIVE	Add
		LONGBOAT KEY, FL 34228	Remove
			Change
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Effective date, if other fan effective date is listed, Note: If the date inserte locument's effective dat	the date must be sp d in this block do	ecific and cannotes not meet the	ne applicable :	e of filing or more statutory filing re	(option than 90 days after quirements, this	filing.) Pursuant to	605.0207 listed as
e record specifies a The 90th day afte	a delayed effe r the record is	ctive date, s filed.	but not an	effective tim	e, at 12:01 a	i.m. on the ea	arlier of
January 21 Dated		20	22				
-		$\overline{}$					

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Typed or printed name of signee

Filing Fee: \$25.00