

L19 000 267813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

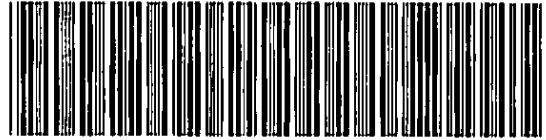
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08/30/22--01002--007 \*\*25.00

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Division of Corporation

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Pompano Beaches Vacation Rentals, LCC  
\_\_\_\_\_  
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:

Ilene S Schnall

\_\_\_\_\_  
Name of Person

Ilene S Schnall PA

\_\_\_\_\_  
Firm/Company

2480 N Andrews Ave, Suite 1

\_\_\_\_\_  
Address

Wilton Manors, FL 33311

\_\_\_\_\_  
City/State and Zip Code

elysehr1@yahoo.com

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

22 AUG 30 AM 10:26

REGISTRATION  
DIVISION OF CORPORATIONS

For further information concerning this matter, please call:

Ilene S Schnall

954 768 1946  
at ( )  
Area Code Daytime Telephone Number

\_\_\_\_\_  
Name of Person

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

**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	Michael M Schechter Declaration	1054 Lyndhurst K	<input type="checkbox"/> Add
		Deerfield Beach, FL 33442	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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 DIVISION OF CORP. REGISTRATION  
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THE UNIVERSITY OF CHICAGO

(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

8/22/22

Signature of a member or authorized representative of a member

Elyse Schechter

Elyse Schechter  
Typed or printed name of signee