

49 000 284 967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

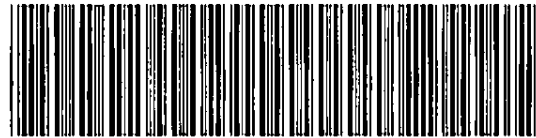
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Tallahassee, Florida

US
11/14/20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2772 BAYVIEW DR 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:

GREGORY L. ORICK II
Name of Person
2772 BAYVIEW DR LLC
Firm/Company
2815 BAYVIEW DRIVE
Address
NAPLES, FL 34112
City/State and Zip Code
billing@orickmarine.com
E-mail address: (to be used for future annual report notification)

2023 OCT -5 PM 3:19
FILED

For further information concerning this matter, please call:

HILARY KING
Name of Person
239
Area Code
949-5588
Daytime Telephone Number
at ()

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 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>
AR	ELISE T OLIVERI	2775 BAYVIEW DRIVE	<input type="checkbox"/> Add
		NAPLES, FL 34112	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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ST. LOUIS MO

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

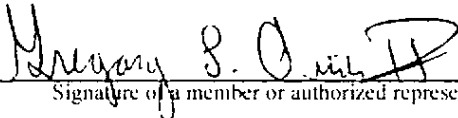
Multiple horizontal lines for amending information.

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ELECTRONIC

E. Effective date, if other than the date of filing: 10/1/2020 (optional)
(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)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 1 2020



Signature of a member or authorized representative of a member

GREGORY L. ORICK II

Typed or printed name of signee