

L20000001706

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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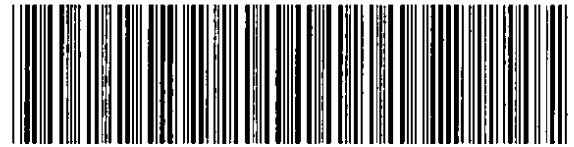
(Business Entity Name)

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: 877 SW WALNUT TERRACE, 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:

JANNA SEGLEN

Name of Person

877 SW WALNUT TERRACE, LLC

Firm/Company

1085 SW TAMARIND WAY

Address

BOCA RATON, FL 33486

City/State and Zip Code

JANNASEGLEN@GMAIL.COM

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

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2003 JUN 11 PM 9:44
TALLAHASSEE, FL
DIV OF STATE

For further information concerning this matter, please call:

JANNA SEGLEN at (561) 926-4262
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**

877 SW WALNUT TERRACE, 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 12/19/2019

Florida document number L20000001706

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CAMINO GARDENS PROPERTIES, LLC

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:

1085 SW TAMARIND WAY, BOCA RATON FL 33486 US.

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

1085 SW TAMARIND WAY, BOCA RATON FL 33486 US.

(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:

ALAN B. DUBROW at DUBROW, DUKER & ASSOCIATES, P.A.

New Registered Office Address:

5401 NORTH UNIVERSITY DRIVE, SUITE 204

Enter Florida street address

CORAL SPRINGS

City

Florida 33067

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	JANNA SEGIEN	1085 SW TAMARIND WAY, BOCA RATON FL 334	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	CHRISTOPHER SEGIEN	1085 SW TAMARIND WAY, BOCA RATON FL 334	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	MITCH WILSON	1085 SW TAMARIND WAY, BOCA RATON FL 334	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2015 JUN 11 PM 9:46
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ATTORNEY GENERAL
TALLAHASSEE, FL

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TALLAHASSEE, FL

(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)

Typed or printed name of signee