

L20000033924

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

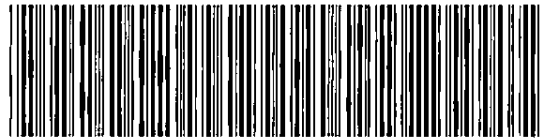
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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10/28/24--01024--029 **25.00

2024 OCT 28 14:09:33

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BACINI YACHTING 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:

Gianni Brill

Name of Person

BACINI YACHTING

Firm/Company

1043 Hillsboro Mile 21C

Address

Hillsboro Beach, FL 33062

City/State and Zip Code

baciniyachting@gmail.com

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

For further information concerning this matter, please call:

Gianni Brill

305 3999792
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

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL
JUN 26 2003

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>
AMBR	Rosalinda Philipson	6464 NE 2nd Ave. 503, Boca Raton, FL 33487	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PETER STARFLINGER		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		225 SE 16TH AVE, FORT LAUDERDALE, FL 33301	<input checked="" type="checkbox"/> Change
MGR	Gianni Brill		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1043 Hillsboro Mile 21C Hillsboro Beach, FL 33062	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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OCT 28 10 09 AM '24

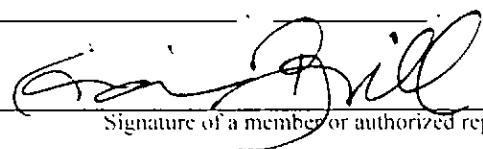
E. Effective date, if other than the date of filing: _____ (optional)

(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 10/16/2024



Signature of a member or authorized representative of a member

Gianni Brill

Typed or printed name of signee