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TO: **Registration Section
Division of Corporations**

SUBJECT: BEACHFRONT PROPERTIES BOCA RATON 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:

Manuel Fasce
Name of Person
BEACHFRONT PROPERTIES BOCA RATON LLC
Firm/Company
100 Plaza Real S. STE. D
Address
Boca Raton Florida 33432
City/State and Zip Code
fascemr@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call

Manuel Fasce at (561) 561-251-8281
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

FILED

2021 OCT 21 AM 10:49

Beachfront Poperties Boca Raton LLC

(Name of the Limited Liability Company as it now appears on our records.
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/17/2020 and assigned
Florida document number 120000054221

This amendment is submitted to amend the following:

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

Manuel Fasce Group LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

27 NE 4th Ave. Delray Beach, FL 33483

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

5363 Park Place Circle Boca Raton FL 33486

(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:

New Registered Office Address:

5363 Park Place Circle

Enter Florida street address

Boca Raton

City

Florida

33486

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

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

Completely remove Ivana Shoultz from Beachfront Properties Boca Raton LLC

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 10/12/2021

Signature of a member or authorized representative of a member

Ivana Shoultz

document verified
10/12/21 11:52 AM EDT
J31Y BAUT HWRO FH8Z

Manuel Fasse

Ivana Shoultz

Typed or printed name of signee

Filing Fee: \$25.00