

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet  
**L20000054457**

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : BAKER & HOSTETLER LLP  
Account Number : I1999000077  
Phone : (407)649-4016  
Fax Number : (407)841-0168

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**

**8367 VIA ROSA, LLC**

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 8367 Via Rosa, 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:

Keith C. Durkin

Name of Person

Baker & Hostetler LLP

Firm/Company

200 South Orange Avenue, Suite 200

Address

Orlando, FL 32801

City/State and Zip Code

carina@finishmycondo.com

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

For further information concerning this matter, please call:

Keith C. Durkin

at (407) 649-4005

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**

(((H22000241872 3)))

8367 Via Rosa, 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 February 21, 2020 and assigned  
Florida document number L20000054457.

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

8367 Via Rosa

Orlando, FL 32836

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8367 Via Rosa

Orlando, FL 32836

**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: CARINA RADONICH

New Registered Office Address: 8367 Via Rosa

*Enter Florida street address*

Orlando

Florida 32836

City

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

(((H22000241872 3)))

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**

[illegible]

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

[illegible]

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 605.0247 (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 June 10, 2022

Signature of a member or authorized representative of a member

CARINA RADONICHI

Typed or printed name of signee

**Filing Fee: \$25.00**