120000120131

(Red	questor's Name)	
(Ada	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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COVER LETTER

Division of Corp			
SUBJECT:	atie Dana	LLC	
	Name of Lim	ited Liability Company	
771 L. LA .' L		or the second	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	<u>Lath</u>	yn Antonelli Name of Person	,
		Name of Person	
		Firm/Company	
	16102	Caldera Ln Address	
		Address	
	N	City/State and Zip Code Ore Katil 5 egm to be used for future annual report notifi	t110
		City/State and Zip Code	ail am
	E-mail address: (to be used for future annual report notifi	fication)
For further information co	oncerning this matter, please ca		
	•		52-27
Kane M		at (30) 807-	e Telephone Number
Nutile of	Clarin	Mea Code Daytink	e retefinine Number
Enclosed is a check for th	e following amount:		
S25.00 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 S		Street Address: Registration Sec	vion

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



RECEIVED

FLORIDA DEPARTMENT OF STATE 2022 HAY -6 AH 8: 09 Division of Corporations

April 18, 2022

SECRETA TALLAMASSEE, FL

KATHYRN ANTONELLI 16102 CALDERA LANE NAPLES, FL 34110

SUBJECT: KATIE DANA LLC Ref. Number: L20000120131

We have received your document for KATIE DANA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's date of incorporation/organization must be listed in the document.

The name of a limited liability company must contain the designation "L.L.C.," "LLC," or the words "LIMITED LIABILITY COMPANY." Please amend the name of your entity accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 822A00009060

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Katie	.Dana L		2022	MAY -6 PI	1 3: 53
(Name of the Limited (A	Liability Company Florida Limited Lia	as it now appears on our bility Company)	records.)		STATE
The Articles of Organization for this Limited Liab		ere filed on 05/C	14/202C	LLAHAS SE O and assig	E.FL med
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of the Semporary of the new name must be distinguishable and contain the work.	re Sh	ried LL	on "LLC" or the ab	breviation "L.L.	C."
Enter new principal offices address, if applicab	ole:	16102 Naples	Calde F136	ra Ln HID	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>ox)</u> .	16102 Napres	Carden ,FL 34	iln 110	
B. If amending the registered agent and/or reg agent and/or the new registered office address		dress on our records,	enter the nam	e of the new	registered :
Name of New Registered Agent:					
New Registered Office Address:	10102	Cal dera!	いる		
	<u>N</u>	tiner rioriaa stree	Florida	ZAII (<u> </u>

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 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>	Name	Address	Type of Action
	nla		□Add
			□Remove
			□Change
			□Add
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	n/a
)
	
an effecti	date, if other than the date of filing:
<u>lote:</u> If t ocument	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 's effective date on the Department of State's records.
record splis filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
ated	March 30 . 2022.
	$10 \rightarrow 0$
	Vathertmell
	Signature of a member or authorized representative of a member Yath My Antone U Typed or printed hame of signee