

L20000 151489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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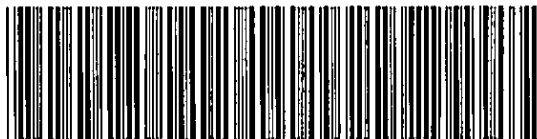
(Business Entity Name)

(Document Number)

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2020 JUN 17 AM 7:28  
JUL 25 2020  
S. YOUNG

# SIMON AND SCHMIDT

ATTORNEYS AT LAW  
766 SE 5TH AVENUE  
DELRAY BEACH, FLORIDA 33483

ERNEST G. SIMON

TELEPHONE (561) 278-2601  
FAX (561) 265-0286

DAVID W. SCHMIDT

June 15, 2020

Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

Re: 1301 N Federal Highway LLC  
Document No. L20000151489

Dear Ladies and Gentlemen:

Enclosed please find the Cover Letter and Articles of Amendment to Articles of Organization of 1301 N Federal Highway LLC. I enclose my Law Account check in the amount of \$30.00 for the filing fee and Certificate of Status. Please send the Certificate of Status to the address above.

Should you require anything further, please let me know.

Sincerely yours,

A handwritten signature in black ink, appearing to read "David W. Schmidt". The signature is fluid and cursive, with the first name "David" and last name "Schmidt" being clearly legible.

David W. Schmidt

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 1301 N Federal Highway 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:

David W. Schmidt, Esq.

\_\_\_\_\_  
Name of Person

Simon and Schmidt

\_\_\_\_\_  
Firm/Company

766 SE 5th Avenue

\_\_\_\_\_  
Address

Delray Beach, FL 33483

\_\_\_\_\_  
City/State and Zip Code

daymon@affluentrealtyfl.com

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

For further information concerning this matter, please call:

David W. Schmidt

561 278-2601  
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

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

This amendment is submitted to amend the following:

## 4710 Myla Lane, LLC

**Enter new principal offices address, if applicable:**

620 Whitney Avenue

Lantana, FL 33462

## 620 Whitney Avenue

Lantana, FL 33462

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

**Florida**

City

Zip Code

*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**

[illegible]

[illegible]

(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.

Dated June 15 , 2020

Signature of a member or authorized representative of a member

Typed or printed name of signee