

L2 0000 / 80398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

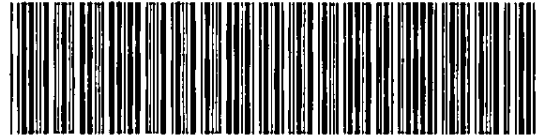
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 JUN -5 PM 12:21
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CLEAR2CLOSE

TITLE & ESCROW LLC

December 19, 2022

Via U.S. Regular Mail:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: 2197 N. Ocean Blvd LLC

To Whom It May Concern:

Please find the Amendment to be filed in reference to Document L20000180398.

Should you need any further assistance or have any questions, please do not hesitate to contact our office.

Thank you,

Jamie Steinberg

Jamie Steinberg
Real Estate Paralegal
Clear2Close Title & Escrow, LLC

2023 JAN 10 PM 10:21
FBI - TALLAHASSEE
17

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2197 N. OCEAN BLVD 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:

RYAN SHIPA, ESQ

Name of Person

CLEAR2CLOSE Title 3 ESCROW

Firm/Company

814 W. LANTANA RD SUITE 2B

Address

LANTANA FL 33462

City/State and Zip Code

INFO@CLEAR2CLOSEFL.COM

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

For further information concerning this matter, please call:

JAMIE STEINBERG

Name of Person

at (561) 600-0448

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

2023 JUN -5 PM 12:22

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

(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 6/26/2020 and assigned Florida document number L20000180398.

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 "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(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: _____

Enter Florida street address

_____, **Florida** _____
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

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>
MGR	JOHN MOORE		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		AMBR	<input checked="" type="checkbox"/> Change
MGR	GARETH MOORE		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		AMBR	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2023. File: 22
1A.

(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)

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.

Signature of a member or authorized representative of a member

Ryan Shipp
Bar #52883

Typed or printed name of signer

Filing Fee: \$25.00