

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L20000278745 255

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(((H22000278745 3)))



H220002787453ABC4

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To:

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

From:

Account Name : SANDRA ROLON & ASSOCIATES, CPA, PA
Account Number : 119980000068
Phone : (954)437-0700
Fax Number : (954)436-8195

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

Email Address: alina@sracpa.net

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
6101 ESTERO, LLC**

Certificate of Status	0
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Estimated Charge	\$25.00

2022 AUG 17 14:13

2022 AUG 17 PM 4:13
SECRETARY OF STATE
FALL AID/SECRET/0000

APPROVED
AND
FILED

Aug. 17, 2022 1:08PM

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF H22 000278745 3

No. 0490 P. 2/4

6101 ESTERO, 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 JULY 22, 2020 and assigned
Florida document number L20000215255.

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

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AND
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SECRETARY OF STATE
TALLAHASSEE, FL 09117

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

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If an ^{ADD} 17, 2022, 1:09PM son(s) authorized to manage, enter the title, name, and address No. 0490, crsc P. 3/4 g added
or removed from our records:

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MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JANET YAHAV	14511 STIRLING ROAD	<input checked="" type="checkbox"/> Add
		SOUTHWEST RANCHES, FL 33330	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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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 605.0207 (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



12/12/2012

Signature

Signature of a member or authorized representative of a member

ODED YAHAV

Typed or printed name of signee

H22 000 278 745 3

Filing Fee: \$25.00