

L20 000218638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

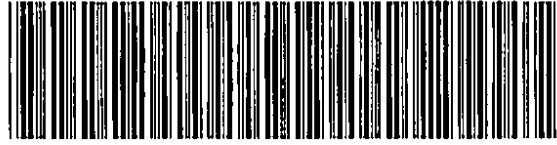
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2020 NOV 17 PM 5:42

FILED

X SALY

NOV 17 2020



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 13, 2020

CHELSEY REISINGER LLC
CHELSEY REISINGER
3100 S DIXIE HWY, *APT D6*
BOCA RATON, FL 33432

SUBJECT: CHELSEY REISINGER LLC
Ref. Number: L20000218638

We have received your document for CHELSEY REISINGER 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 520A00020181



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 10, 2020

CHELSEY REISINGER LLC
CHELSEY REISINGER
3100 S DIXIE HWY, APT D6
BOCA RATON, FL 33432

SUBJECT: CHELSEY REISINGER LLC
Ref. Number: L20000218638

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Karen A Saly
Regulatory Specialist II

Letter Number: 420A00022504

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Chelsey Reisinger 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:

Chelsey Reisinger

Name of Person

Chelsey Reisinger LLC

Firm/Company

3100 S Dixie Hwy

Address

Boca Raton, FL 33432

City/State and Zip Code

chelseyreisinger@gmail.com

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

For further information concerning this matter, please call:

Chelsey Reisinger

561

215-7397

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

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

Chelsey Reisinger LLC

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

FILED
2020 NOV 17 PM 5:42
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on July 24, 2020 and assigned
Florida document number 120000218638.

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	Chelsey Reisinger	3100 S Dixie Hwy Apt D-6	<input type="checkbox"/> Add
		Boca Raton, FL 33432	<input type="checkbox"/> Remove
			<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"/> Remove
			<input type="checkbox"/> Change

FILED
2023 OCT 17 PM 5:46
CLERK OF DISTRICT COURT
PALM BEACH COUNTY

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

Chelsey Reisinger is the managing member of the entity, Chelsey Reisinger LLC

Phone number has changed from 717-681-3723 to 561-215-7397

FILED
2020 NOV 17 PM 5:42
CLERK OF COURT
TALLAHASSEE, FLORIDA

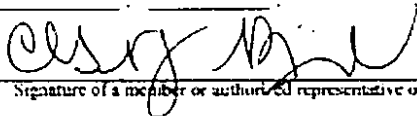
F. Effective date, if other than the date of filing: August 24, 2020 (optional)

(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 August 24 2020



Signature of a member or authorized representative of a member

Chelsey Reisinger

Typed or printed name of signer

Filing Fee: \$25.00

On Nov 17, 2020, at 8:56 AM, Saly, Karen <Karen.Saly@DOS.MyFlorida.com> wrote: