L200003147CI

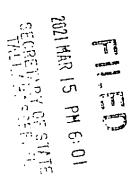
(Requestor's Name)
(Address)
(1333)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
5/15/21
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 26, 2021

DARREL BAKER 21515 BELHAVEN WAY ESTERO, FL 33928

SUBJECT: 7303 LOUISE DR INVESTMENTS, LLC.

Ref. Number: L20000314701

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

The document is illegible and not acceptable for imaging.

Please complete the enclosed form.

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.

Querida R Moore Regulatory Specialist II

Letter Number: 821A00004257

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	7303	Louise Dr	Investments, LLC
SUBJECT:	Name of Limite	d Liability Company	,
The enclosed Articles of A	amendment and fee(s) are subm	itted for filing.	
	dence concerning this matter to		
		Darrel Bake	<u> </u>
		Name of Person	
	7303	Louise Dr In	vestments, LLC
	2151	5 Belhayen	Way
	Coastalliv E-mail address: (to	City/State and Zip Code ing Realty 2 be used for future annual report not	gmail.com
For further information co	oncerning this matter, please cal		
Darrel	Baker	at (239) 46	4-5137 ne Telephone Number
Name of	Person	Area Code Dayun	ic receptione (
Enclosed is a check for th	e following amount:		
S25.00 Filing Fee Already Paid	☐ \$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)
<u>Mailing Addres</u>	s:	Street Address:	
Registration S	Section	Registration Se	
Division of C P.O. Box 632	-	Division of Co The Centre of	
Tallahassee, l			pe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

7303 Loui	se Dr Inyestments ensist.
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	v as it now appears on our records CRETARY OF STATE TALL MASSEE, FL
The Articles of Organization for this Limited Liability Company v Florida document number	vere filed on 10 - 5 - 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil The new name must be distinguishable and contain the words "Limited Liability".	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	21515 Belhaven Way Estero, FL 33928
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	21515 Belhaven Way Estero, FL 33928
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	
Name of New Registered Agent:	rrel S. Baker 15 Belhaven Way Enter Florida street address 20, Florida
New Registered Office Address: 215	Enter Florida street address
Este	City Florida 33938
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree	ee 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>	Name	Address	Type of Action
m G R	Steven S. Mangione	3046 Del Prado Blud S	🗆 Add
		Ste 1-A5	Remove
		Cape Coral, FL 33904	□ Change
MGR	Daniel Jelley	3046 Del Prado Blud S	□Add
	. ,	Ste 1-A5	[X Remove
		Cape Coral, FL 33904	Change
AMBR	Darrel S. Baker	21515 Belhaven Wa	4 DAdd
-		Estero, FL 33928	, P □ Remove
			□Change
			🗆 Add
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m effectiv o te: If th	e date is listed, the	than the date of the date of the date must be specificated in this block do on the Departm	ecific and can les not meet	nnot be prior to t the applicab	10-20 date of filing o le statutory fi	r more than 90	(optional days after filin ents, this dat	g.) Pursuant to 60	95.020 sted a
ecord sp is filed.	ecifies a delaye	d effective date.	but not an	effective tim	e, at 12:01 a.:	n, on the earl	ier of: (b) 1	The 90th day aft	er the
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		Daniel.	6 1	eller					
		Signa	ure of a mer	nber or authori	zed representa	tive of a memb	er		

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