

120000329890

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(Address)

(Address)

(City/State/Zip/Phone #)

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*Amend*

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: These Beachnutz, 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:

London L. Bates, Esquire

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

London L. Bates Law, P.A.

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

P. O. Box 1213

\_\_\_\_\_  
Address

Dunedin, FL 34697

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

london@londonbateslaw.com

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

For further information concerning this matter, please call:

London L. Bates, Esquire

727 734-8700  
\_\_\_\_\_  
at ( )  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

20 NOV 14 4:09 PM

RECEIVED  
DIVISION OF  
CORPORATIONS

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

These Beachnutz, 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 October 19, 2020 and assigned  
Florida document number L20000329890.

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:

901 Curlew Road

(Principal office address MUST BE A STREET ADDRESS)

Dunedin, Florida 34698

Enter new mailing address, if applicable:

901 Curlew Road

(Mailing address MAY BE A POST OFFICE BOX)

Dunedin, Florida 34698

**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	Glenn J. Gagliardi	901 Curlew Road	<input checked="" type="checkbox"/> Add
		Dunedin, Florida 34698	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Denise S. Exley	3266 Sandy Ridge Drive	<input type="checkbox"/> Add
		Clearwater, FL 33761	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Chris Kohler	3266 Sandy Ridge Drive	<input type="checkbox"/> Add
		Clearwater, FL 33761	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Bruce Throdahl	3266 Sandy Ridge Drive	<input type="checkbox"/> Add
		Clearwater, FL 33761	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Glenn Gagliardi	3266 Sandy Ridge Drive	<input type="checkbox"/> Add
		Clearwater, FL 33761	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[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)

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 11/11/20, \_\_\_\_\_

Glenn J. Englund  
Signature of a member

Signature of a member or authorized representative of a member

Glenn J. Gagliardi, Manager

Typed or printed name of signee

**Filing Fee: \$25.00**