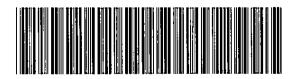
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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

TO: Registratio Division of	n Section Corporations		
	LE CONDO LLC		
SUBJECT:	Name of Li	imited Liability Company	
The enclosed Article	s of Amendment and fee(s) are so	ubmitted for filing.	
Please return all corr	espondence concerning this matte	er to the following:	
	CHARLES V CASALE		
		Name of Person	
		Firm/Company	
	339 BARTLETT RD		
		Address	
	COOPERSTOWN		
	NEW YORK 13326	City/State and Zip Code	
	E-mail address:	: (to be used for future annual report notification)	
For further information	on concerning this matter, please	call:	
CHARLES V CASA		516 446-4858 at ()	
Nan	ne of Person	Area Code Daytime Telephone Number	
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	e □ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	C)
P.O. Box 6	on Section f Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	



FLORIDA DEPARTMENT OF STATE Division of Corporations

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SI MALL MANDER PL

∕May 21, 2021

CHARLES V. CASALE 339 BARTLETT RD COOPERSTOWN, NY 13326

SUBJECT: CASALE CONDO, LLC Ref. Number: L21000053402

We have received your document for CASALE CONDO, 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) 245-6050.

Summer Chatham

Letter Number: 821A00010832

Mederal on 5/39/21 Reviewed on 5/39/21 Signed + returned on 5/39/21

T

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CASALE CONDO 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 JANUARY 29,2021 and assigned Florida document number 1.21000053402 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 "LLC." 339 BARTLETT RD Enter new principal offices address, if applicable: COOPERSTOWN (Principal office address MUST BE A STREET ADDRESS) **NEW YORK 13326** 339 BARTLETT RD Enter new mailing address, if applicable: COOPERSTOWN (Mailing address MAY BE A POST OFFICE BOX) NEW YORK 13326 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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>	Type of Action
MBR	ANASTASIA CASALE	P.O. BOX 827	
		BAITING HOLLOW	■Remove
		NEW YORK 11933	□Change
MGR	DORTHY CASALE	16 PROSPECT STREET	□Add
		MANCHESTER	■Remove
		VERMONT 05254	□Change
MBR DOROTHY CA	DOROTHY CASALE	16 PROSPECT STREET	= Add
	P.O. BOX	P.O. BOX 1142	□Remove
		MANCHESTER, VERMONT 05254	□Change
			□Add
			□Remove
			□Change
			<i>(</i>)
			
			—————————————————————————————————————
			□Remove
			Change

MEMEBER MANANGER	S.	
ANASTASIA CASALE W	ILL NO LONGER BE A MEMBER	
L-1		
ctive date, if other than th	e date of filing:	(optional)
ffective date is listed, the date mi : If the date inserted in this h	ist be specific and cannot be prior to date of filing	or more than 90 days after filing.) Pursuant to 605.02 filing requirements, this date will not be listed
	Department of State's records.	1
		7
ord specifies a delayed effecti filed.	ve date, but not an effective time, at 12:01 a	a.m. on the earlier of: (b) The 90th day after the
		. 27
MARCH 28.	2021	
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