

K21 0000 60558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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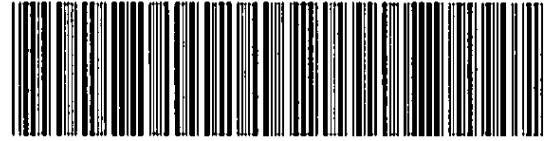
(Business Entity Name)

(Document Number)

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# Corsaro & Associates

A Legal Professional Association

28039 Clemens Road  
Westlake OH 44145

(440) 871-4022/Telephone  
(440) 871-9567/Facsimile

May 4, 2021

**VIA UPS #1Z F60 R31 01 9332 6464**

REGISTRATION SECTION

Division of Corporations

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Re: 5965 N. Bayshore, LLC  
Document Number: L21000060558  
Articles of Amendment to Articles of Organization

Dear Sir or Madam:

Enclosed please find the following documents, being submitted on behalf of the above-referenced entity:

- 1) Cover Letter;
- 2) Articles of Amendment to Articles of Organization; and
- 3) Check No. 400064772 in the amount of \$25.00.

Please file the Articles of Amendment to Articles of Organization, then provide me with your letter of acknowledgment.

If you should have any questions and/or comments regarding the enclosed, please do not hesitate to contact me.

Sincerely,  
CORSARO & ASSOCIATES CO., LPA

By: Barbara L. Watson, Paralegal to  
Mark A. Kikta, Esq.

/blw  
Enclosures

2021 MAY -5 11:28 AM  
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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

5965 N. Bayshore, 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 02/03/2021 and assigned Florida document number L21000060558.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

5975 North Bayshore LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5975  
North  
Bayshore  
LLC

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5975  
North  
Bayshore  
LLC

**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.*



