

Presenting with
Aud. # Number

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

L21000089103

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : MACFARLANE FERGUSON & MCMULLEN (CLEARWATER)
Account Number : 071005001001
Phone : (727)441-8966
Fax Number : (727)442-8470

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: pinellaslawyer@gmail.com

2021 MAR -4 AM 10:05

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SIMEONI PROPERTIES LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

MAR -5 2021

M. SOLIMON

Presenting with Aud. # Number

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SIMEONI PROPERTIES 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 February 26, 2021 and assigned
Florida document number L21000085908

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."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

1700 N. McMullen Booth Road, Suite A7
Clearwater, FL 33759

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

1700 N. McMullen Booth Road, Suite A7
Clearwater, FL 33759

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:

1700 N. McMullen Booth Road, Suite A7

Enter Florida street address

Clearwater

City

, Florida

33759

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

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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>
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Dated March 4

2020

Signature of a member or authorized representative of a member

CARLTON WARD

Typed or printed name of signee

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