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SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

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Registration Section

Tallahassee, FL 32314

TO:

Division of Corp	porations		,		
SUBJECT: BAYVIEW	1, LLC				
30B3ECT	Name of Lim	ted Liability Company			
The enclosed Articles of 7	Amendment and fee(s) are sub	nitted for filing.			
Please return all correspor	ndence concerning this matter	to the following:			
	JOHN J WASKOM ESQ				
		Name of Person			
	ICARD MERRILL CULL				
		Firm/Company			
	8470 ENTERPRISE CIR.	STE 201			
		Address	-		
	LAKEWOOD RANCH FI	. 34202			
		City/State and Zip Code			
	JWASKOM@ICARDMER	RILL.COM o be used for future annual report noti			
For further information ec	oncerning this matter, please co	•		2024 SE(
JOHN J WASKOM ESQ		at (941) 907-0006	;	2024 NOV -8 F	THE THE
Name of	Person	Area Code Daytim	ie Telephone Number	HAS P	facts .
Enclosed is a check for th	e following amount:		ne Telephone Number	PH 1:	, 1974,
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Fi Certifical Certified	ling Fee, te of Status &	
Mailing Address Registration S Division of Co	section orporations	Street Address: Registration Se Division of Cor	rporations		
P.O. Box 632	1	The Centre of T	lallahassee		

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAYVIEW I, LLC	
(Name of the Limited Liability Company as it now appears on o (A Florida Limited Liability Company)	ur_records.)
The Articles of Organization for this Limited Liability Company were filed on February Florida document number 1.21000092486	24, 2021 and assigned
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 designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our record agent and/or the new registered office address here:	AFRICA TO
Name of New Registered Agent:	SSO PE TOTAL
New Registered Office Address:	7F 25
Enter Florida str	eet address
	. Florida

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

Zip Code

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

Title	Name	<u>Address</u> <u>T</u>	vpe of Action
MGR	Estate of Patricia H. Cavanaugh	Daniel A. Boeckermann, co-PR	□Add
		999 Vanderbilt Beach Rd Ste 201	■Remove
		Naples, FL 34108	□Change
MGR	MICHAEL J. REDMOND	119 BAYVIEW DRIVE	■Add
		NOKOMIS, FL 34275	□Remove
			□Change
			□Add
		SECTA	□Remove
		:00 m :00 :00	Memove Dange Add Reprove
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ffectiv	date, if other than the date of filing:(optional) (optional)	
an effec	e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing Pursuance date inserted in this block does not meet the applicable statutory filing requirements, this date will not	it to 6 05.02 07 (
	s effective date on the Department of State's records.	11.5 = -
	்	تقسیمه توسیرا
	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) $\frac{1}{4}$ 90th describes a delayed effective date.	ary after the
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and made	10-29 2024 N	
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ated		
aied	Signature of a member of authorized representative of a member	

Filing Fee: \$25.00