

L21000105764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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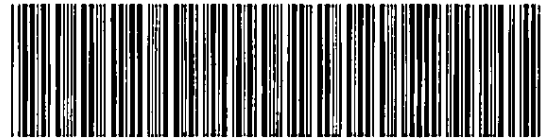
(Business Entity Name)

(Document Number)

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2021 MAR 16 A 10:55

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ave Maria Town Professionals, 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:

Robert L. Klucik Jr.

Name of Person

Robert L. Klucik Jr., P.A.

Firm/Company

5072 Annunciation Circle Suite 326

Address

Ave Maria, FL 34142

City/State and Zip Code

RLK@AveMariaLawyer.com

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

For further information concerning this matter, please call:

Robert L. Klucik Jr.

239 898-4052

at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (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

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

Ave Maria Town Professionals, 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 March 4, 2021 and assigned
Florida document number 121000105764.

This amendment is submitted to amend the following:

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

no change

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:

no change

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

no change

(Mailing address MAY BE A POST OFFICE BOX)

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:

no change

New Registered Office Address:

no change

Enter Florida street address

City

Florida

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>
AMBR	Robert L. Klucik Jr., P.A.	5072 Annunciation Circle #326	<input type="checkbox"/> Add
		Ave Maria, FL 34142	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Robert L. Klucik Jr.	5072 Annunciation Circle #326	<input checked="" type="checkbox"/> Add
		Ave Maria, FL 34142	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Farley & Upham, P.A.	5072 Annunciation Circle #329	<input type="checkbox"/> Add
		Ave Maria, FL 34142	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Laura U. Farley	5072 Annunciation Circle #329	<input checked="" type="checkbox"/> Add
		Ave Maria, FL 34142	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	William E. Farley	5072 Annunciation Circle #329	<input checked="" type="checkbox"/> Add
		Ave Maria, FL 34142	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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March 25, 2021

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to 605.
e list

(b)

Dated

(Klein)

Typed or printed name of signee

Filing Fee: \$25.00