

121 000105916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

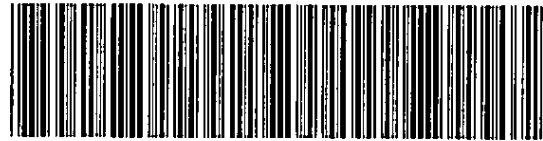
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/11/22--01021--003 \*\*25.00

FILED  
2022 FEB 11 PM 3:19  
CLERK OF SUPERIOR COURT  
MASSACHUSETTS

*Amend*

FEB 24 2022  
D CUSHING

Florida Department of State

Feb 9, 2022

Division of Corporations

RE: Florida Seaside Home LLC-Change principal address

Made application with Northwestern on 3-23-2021 / Document number is 256-2950-8021

I am registered with Northwestern Registered Agent and evidently, when they set my LLC up, they assigned the physical address as the Registered Agent in St. Petersburg, FL. Due to this, when I got my business checking account, Suncoast Credit Union set up my checking with this address also. Therefore I am unable to receive my bank statements for the business at my home address. They are currently being mailed to the Registered Agent address.

I need them changed to my home address—

Florida Seaside Home LLC

813 Islebay Drive

Apollo Beach, Florida 33572

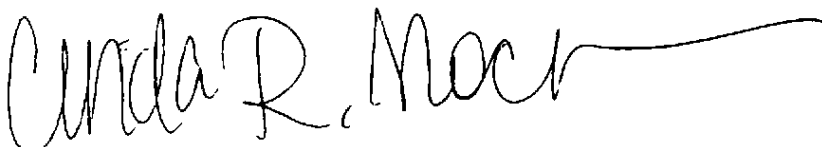
I am including a check for the amount of \$25.00 for the fee to make this change. I have included the application to change my physical address—so it shows up on SunBiz as the above address and not St. Petersburg, FL.

This is the only change requested.

Thank you,

Cinda Mock, Owner

Florida Seaside Home LLC

A handwritten signature in black ink that reads "Cinda R. Mock". The signature is fluid and cursive, with a long horizontal line extending from the end of the name.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: \_\_\_\_\_

Florida Seaside Home LLC

Name of Limited Liability Company

FILED  
2022 FEB 11 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE, FL

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cinda Mock

Name of Person

Florida Seaside Home LLC

Firm/Company

813 Islebay Drive

Address

Apollo Beach, FL 33572

City/State and Zip Code

cinda @ florida seaside home . com

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

For further information concerning this matter, please call:

Cinda R Mock

Name of Person

at 919 616 4242

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

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

Florida Seaside Home 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 3-23-2021 and assigned  
Florida document number 256-2950-8021

2022 FEB 11 PM 1:19  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FL

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

813 Islebay Drive  
Apollo Beach FL 33572

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

813 Islebay Drive  
Apollo Beach, FL 33572

**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.*

**If Changing Registered Agent, Signature of New Registered Agent**

[illegible]

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Feb 9, 2022

Wanda Renee Mack

Signature of a member or authorized representative of a member

Cinda Renee Mack

Typed or printed name of signee

**Filing Fee: \$25.00**