L21000114685

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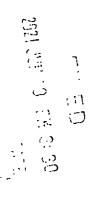




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FRATER LAW FIRM, P.A.

Fitzgerald A. Frater Nathalie Nozile Admitted in Florida, New York & New Jersey
Admitted in Florida

2375 Tamiami Trail North, Suite 210 Naples, Florida 34103 Telephone (239) 649-0595 ·Fax (239) 261-7908

June 8, 2021

Via Regular US Mail

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: 27702 Simmons, LLC

DOC No. L21000114685

Dear Sir/Madam:

Please find enclosed our client's Articles of Amendment to Articles of Organization of 27702 Simmons, LLC along with this firm's check # 1011 in the amount of \$25.00 to cover its associated fee.

If you should have any questions, please do not hesitate to contact this office.

Sincerely,

Nicole Bianchi, Legal Assistant to Fitzgerald A. Frater, Esq.

/nb

Enclosures

Ce: Client

COVER LETTER

TO:

Registration Section Division of Corporations

27702 SIM	MONS , LLC				
	Name of Lim	ited Liability Company			
l Articles of	Amendment and fee(s) are sub	mitted for filing.			
all correspo	ondence concerning this matter	to the following:			
	Fitzgerald A. Frater, Esq.				
		Name of Person			
	Frater Law Firm, P.A.				
		Firm/Company			
	2375 Tamiami Trail North	, Suite 210			
Address					
Naples, Florida 34103					
		City/State and Zip Code			
	E mail addance (to be used for future approach asport page	iffootiun)		
. Fa a tia a			mcann,		
mormation c	oncerning this matter, please c	au:			
Fitzgerald A. Frater, Esq.		239 261-7908 at ()			
Name of Person		Area Code Daytir	ne Telephone Number		
check for th	ne following amount:				
iling Fee	S30.00 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		Street Address: Registration Se	ection		
ision of C	orporations	Division of Co	Division of Corporations		
			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
	Articles of all corresponding all corresponding formation of the check for the check f	Frater Law Firm, P.A. 2375 Tamiami Trail North Naples, Florida 34103 E-mail address: Information concerning this matter, please of the following amount: Filing Fee S30.00 Filing Fee & Certificate of Status Illing Address: gistration Section vision of Corporations D. Box 6327	Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: Fitzgerald A. Frater, Esq. Name of Person Frater Law Firm, P.A. Firm/Company 2375 Tamiami Trail North, Suite 210 Address Naples, Florida 34103 City/State and Zip Code E-mail address: (to be used for future annual report no aformation concerning this matter, please call: Frater, Esq. Name of Person Area Code Dayting the Certificate of Status Certified Copy (additional copy is enclosed) Street Address: gistration Section (rision of Corporations) Division of Corporations Division of Corporations Division of Corporations Division of Corporation The Centre of		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

27702 SIMMONS , LLC		
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our i ida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Florida document number	Company were filed on March 10, 2	021 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited 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 ADE	ORESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or register agent and/or the new registered office address here		enter the name of the new registe
Name of New Registered Agent:	<u>. </u>	
New Registered Office Address:		
	Enter Florida street	address
	ZN:	, Florida Zip Code
	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 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>	Type of Action
MGRM	JOHN MAFFEI	28441 BONITA CROSSINGS BLVD	□Add
		BONITA SPRINGS. FL 34135	■Remove
			□ Change
MGR	JOHN MAFFEI	28441 BONITA CROSSINGS BLVD	= Add
		BONITA SPRINGS, FL 34135	□Remove
			□Change
			□Add
			□Remove
			□Change
	,		□Add
			□Remove
			□Change
			Add
			⊡Remove
			□ Change
			OAB
			Remove
			□ Change

If amending any other i		-	·	•
				
		<u></u>		 .
-				
_				
Effective date, if other t (If an effective date is listed, the Note: If the date inserted document's effective date	in this block does no	ot meet the applicable	te of filing or more than 90 day statutory filing requirement	(optional) is after filing.) Pursuant to 605.0207 (is, this date will not be listed as t
he record specifies a delayed ord is filed.	I effective date, but	not an effective time,	at 12:01 a.m. on the earlier	of: (b) The 90th day after the
ora is med.				or (b) The sources and the
_	4	2021		
Dated <u>TUNE</u>		_ , .		<i>-</i> , ,
Dated TUNE				25
Dated <u>TUNE</u>			d representative of a member	•

Filing Fee: \$25.00