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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

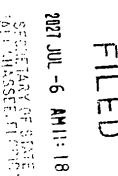
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A RAMSEY

Kevin kriter gave permissi to change the titles from owner to authorized pers

AJR 7/16/21



June 21, 2021

MICHAEL WYATT 79 SW 12TH ST UNIT 3103 MIAMI, FL 33130

SUBJECT: WYNTER LLC Ref. Number: L21000142761

We have received your document for WYNTER LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 321A00013970

Tekayla T Matthews OPS

www.sunbiz.org

COVER LETTER

TO: Registration Solution of Col			
Wynter LL SUBJECT:	С	v	
SOBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Michael Wyatt		
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	Wynter LLC		
		Firm/Company	
	79 sw 12th st unit 3103		
		Address	
	Miami/FL 33130		
		City/State and Zip Code	
	kevin@wynterarms.com E-mail address: (to be used for future annual report notif	fication)
For further information of	concerning this matter, please c		
Michael Wyatt		727 244-2892 at ()	
Name o	of Person	Area Code Daytimo	e Telephone Number
Enclosed is a check for t	he 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)
		Sa	

Mailing Address:

TO:

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

3

Wynter LLC				30 B
(<u>Name of the Limited Liat</u> (A Flor	ility Compa ida Limited	iny as it now appears on o Liability Company)	our records.)	and assigned
The Articles of Organization for this Limited Liability	/ Company	were filed on $\frac{03/26/20}{}$)21	and assigned
Florida document number L21000142761				
This amendment is submitted to amend the following:				· 18
A. If amending name, <u>enter the new name of the li</u>	mited liab	ility company here:		•
The new name must be distinguishable and contain the words "L	imited Liabi	lity Company," the designa	ntion "L.I.C" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		5686 youngquist road unit 217		
Principal office address MUST BE A STREET AD	DRESS)	fort myers, FL 33912		
Enter new mailing address, if applicable:		5686 youngquist road	l unit 217	
Mailing address MAY BE A POST OFFICE BOX)		fort myers, FL 33912		
B. If amending the registered agent and/or registe agent and/or the new registered office address here	<u>2</u> :		ds, <u>enter the na</u>	me of the new register
Name of New Registered Agent.	hael Wyatt		,	
New Registered Office Address: 568	6 youngqui:	st road unit 217		_
		Enter Florida sti		22017
<u>For</u>	t Myers	City	, Florida ²	Zip Code
		Cuy		ng 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>	Address	Type of Action
AP	Michael Wyatt	5686 youngquist road	■Add
		Fort Myers, FL 33912	□Remove
			□Change
AP	Kevin Kinter	5686 youngquist road	
		Fort Myers, FL 33912	□ Remove
			□Change
			□Add
			□ Remove
			Change
			□Add
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tive date is listed, the date must be spec f the date inserted in this block doe	ific and cannot be pri	or to date of filing or	more than 90 days aft	er filing.) Pursuant to 60
nt's effective date on the Departme			ing requirements, o	no date will not be its
specifies a delayed effective date, ld.	out not an effective	time, at 12:01 a.m	on the earlier of:	(b) The 90th day aft
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5/10	2021		•	0 0
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Filing Fee: \$25.00