KZ1000150465

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	-
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Sasiness Entity Name)	
(Document Number)	
Certified Copies Certificates of S	Status
Special Instructions to Filing Officer:	

Office Use Only



700380072027

01/24/22--01017--016 **25.00

22 Jan 21 PH 3: 11

T. MATTHEWS

JAN 28 2022

COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations

TO:

Checked Or	ut fl LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	return all correspondence concerning this matter to the following: Stephen Caraccio Name of Person Checked Out II LLC Firm/Company 340 Royal Poinciana Way Suite 317-359 Address Palm Beach FL 33480 City/State and Zip Code caracciostephen@gmail.com E-mail address: (to be used for future annual report notification) rther information concerning this matter, please call: en Caraccio 561 267-5880		
Please return all correspo	ondence concerning this matter	to the following:	
	Stephen Caraccio		
	Checked Out II LLC	Name of Person	
		• •	
	340 Royal Poinciana Way S		
	Palm Beach FL 33480		
	caracciostephen@gmail.com	·	
			ress d Zip Code iture annual report notification) 267-5880 a Code Daytime Telephone Number Filing Fee & Go Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	oncerning this matter, please ca		
Stephen Caraccio			
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
Mailing Address Registration S	Section	Street Address: Registration Sc	
Division of C	Corporations	Division of Co	rporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The first of the first

Checked Out II LLC

22 JFF 24 FH 3: 11

(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "l	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3086 S Dixie Hwy	
Principal office address MUST BE A STREET ADDRESS)	West Palm Beach FL 33405	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	340 Royal Poinciana Way	
	Suite 317-359	
	Palm Beach FL 33480	
3. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>en</u>	ter the name of the new regi
New Registered Office Address:		
	Enter Florida street ad	dress
		, 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Alexa Caraccio	340 Royal Poinciana Way	
		Suite 317-359	≣Remove
		Palm Beach FL 33480	SKCIIIOVC
			□Change
		1	□ Add
			□Remove
			□Change
			_
			Remove
			□Change
			□ Add
			Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

				_
				_
	-			
			<u>.</u>	
	,			
 .				
				_
			••	
	***			_
	_			_
·	<u> </u>		 -	_
		<u>.</u> .	<u>-</u>	
<u></u>		<u> </u>		
ffective date, if other than the an effective date is listed, the date motore: If the date inserted in this becoment's effective date on the limited and the limited are the limited and the limited are the limited and the limited are the l	ust be specific and cannot be prior block does not meet the applic	able statutory filing requ	(optional) n 90 days after filing.) Pursuant to irements, this date will not be	505.0207 isted as
	ive date, but not an effective t	ime, at 12:01 a.m. on the	earlier of: (b) The 90th day a	fter the
is filed.	2022			
l is filed. January 20	2022	·		
l is filed. January 20	2022 AA	·		
l is filed.	2022 Signature of a member or auth	Orized representative of a m	ember	