

L21 000 160653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

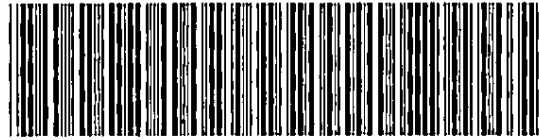
(Document Number)

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7/15/21
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21 JUN 25 PM 12:22



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 11, 2021

ASHLEY M SOLDAT
469 VILLAGE DR
TARPON SPRINGS, FL 34689

SUBJECT: WEE OTTER SWIM, LLC
Ref. Number: L21000160653

We have received your document for WEE OTTER SWIM, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$30.00.

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.

Tekayla T Matthews
OPS

Letter Number: 521A00013030

2021 JUN 25 PM 3:46

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wee Otter Swim, 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:

Ashley M Soldat

Name of Person

Wee Otter Swim, LLC

Firm/Company

469 Village Drive

Address

Tarpon Springs, FL 34689

City/State and Zip Code

weeotterswimlessons@gmail.com

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

For further information concerning this matter, please call:

Ashley Soldat 727 999-1032

Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

RECEIVED
APR 29 2011

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

21 JUN 25 PM 12: 22

Wee Otter Swim, 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 04/07/2021 and assigned
Florida document number L21000160653.

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)

Enter new mailing address, if applicable:

(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:

Ashley M Soldat

New Registered Office Address:

469 Village Drive

Enter Florida street address

Tarpon Springs

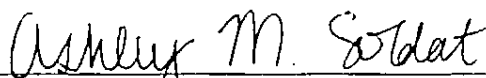
City

Florida 34689

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

21 JUN 25 PM 12:22

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Ashley M Soldat	469 Village Drive	<input type="checkbox"/> Add
		Tarpon Springs, FL, 34689	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AP	Ashley M Soldat	469 Village Drive	<input type="checkbox"/> Add
		Tarpon Springs, FL, 34689	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

For some reason there is a MS. at the end of my name. this needs to be removed please.

21 JUN 25 PM 12:22

E. Effective date, if other than the date of filing: 04/26/2021 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated April 26th, 2021

Ashley M. Soldat

Signature of a member or authorized representative of a member

Ashley M. Soldat

Typed or printed name of signee