

To: 18506176383

6/8/2021

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2021-06-08 15:15:03 UTC

(39) 500903

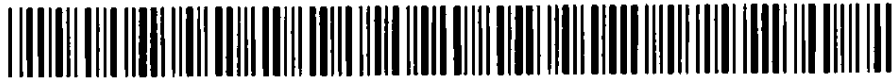
From: Sherrie Ode

L21000161619

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : SALVATORI LAW OFFICE, PLLC
Account Number : I20170000055
Phone : (239)308-9191
Fax Number : (239)552-4185

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: LSJ@SALVATORI.LEGAL

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
1101 WINDING PINES CIRCLE, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$25.00 |

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Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1101 Winding Pines Circle, 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 April 7, 2021 and assigned
Florida document number L21000161619

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**)

c/o Salvatori Law Office, PLLC

5150 Tamiami Trail North, Suite 304

Naples, Florida 34103

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: Salvatori Law Office, PLLC

New Registered Office Address: 5150 Tamiami Trail North, Suite 304

Enter Florida street address

Naples, Florida 34103
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

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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> | <u>Type of Action</u> |
|--------------|---------------------|-----------------------|--|
| MGR | Juliana A. Sorbello | 101 Devon Road | <input type="checkbox"/> Add |
| | | Cinnaminson, NJ 08077 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
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CLERK OF DISTRICT COURT
FLORIDA
JULIANA SORBELLO

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

ALLAHABAD, INDIA.

2021 JUN -8 PM 4:50

270

F. Effective date, if other than the date of filing: _____ (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 June 4 2024

Salvatore J. Scialle

Signature of a member or authorized representative of a member

Salvatore C. Sorbello, as Manager

Typed or printed name of signer

Filing Fee: \$25.00

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