L21000180948

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		:
		6/17/21 Tm

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COVER LETTER

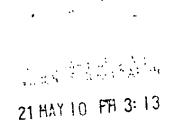
TO: Registration Solution of Co			
	D SOUTH AT SIESTA KEY, !	LLC	
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	DENNIS C GOTTSCHAL	JK	
	- And the	Name of Person	
		Firm/Company	
	3263 BENEVA RD UNIT	103	
	•	Address	
	SARASOTA FL 34232		
	emailfordennis@gmail.con		
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report not all:	ification)
DENNIS C GOTTSCH	ALK	941 225-1970	
Name o	f Person	at () Area Code Daytin	ne 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)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	Section	Street Address: Registration Se	
Division of C P.O. Box 632	•	Division of Co The Centre of T	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



IDLEWILD SOUTH AT SIESTA KEY, 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 04/19/2021	and assigned
Florida document number L21000180948		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" of	r 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 agent and/or the new registered office address here:	address on our records, enter the	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		da
	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

	from our records:	manage, enter the o	incommunity and address of each	n jerion demi uc
MGR = M $AMBR = A$	lanager Authorized Member		21 HAY 10 FA 3: 13	
<u>Title</u>	Name	Address	21 MAY 10	Type of Action
MGR	DENNIS C GOTTSCHALK	3263 BENEVA	RD UNIT 103	= Add
				□Remove
		SARASOTA FI	L 34232	□Change
				🗆 Add
		-		□Remove
				🗆 Change
	<u></u>			🗀 Add
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		05/06/2021			
Effective date, if other than the fan effective date is listed, the date m	e date of filing: _ ust be specific and ca	anot be prior to date	of filing or more than 9	(Optional) 0 days after filing.) Pursuant t	o 605.0207 (
Note: If the date inserted in this document's effective date on the	block does not mee	t the applicable s	atmory filing require	ments, this date will not be	e listed as t
ocument's effective date on the	Department of State	e s records.			
record specifies a delayed effect	iva data, but not an	affactive time a	12:01 a.m. on the ea	rlier of: th) The 90th day	after the
ed is filed.	ive date, but not an	enegave time, a	12.01 dan. on the Ca	rifer or. (ii) The 70th day	arer are
Dated MAY 6	· 	2021			
TOTAL	60				
	Supartire of a men	nber or authorized	representative of a mem	ber	
	- 3	er or additionated	September 11 to 111still		
DENNIS C GOTTSCI	HALK				
		ned or printed nan		.	

Filing Fee: \$25.00