

L21000229485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

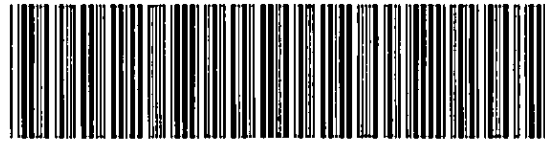
(Business Entity Name)

(Document Number)

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2021 AUG 12 PM 3:51  
AUG 12 2021

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Dept of State  
Registration Section  
Div of Corporations  
POB 6327  
Tallahassee, FL 32314

Lisa Addeo  
335 E. Linton Blvd.  
Suite 1951  
Delray Beach, FL 33483  
(561) 990-8198

August 5, 2021

Dear Sir or Madame,

Re: amending/ADDING MGR and AMBR for Mermaid Fire Sky, LLC

I need to open a business checking account at Bank of America. I visited my bank today and they alerted me to the fact that as the owner of my LLC, I do not have authorization to do so and need to be added as an 'Authorized Member' and/or Manager.

Therefore, please accept this amendment application to add my name as BOTH authorized member and manager.

My EIN for my LLC is 87-2029651

Thank you.



Lisa Addeo  
Mermaid Fire Sky, LLC  
[LisaMusic.com@gmail.com](mailto:LisaMusic.com@gmail.com)  
335 E. Linton Blvd Ste 1951  
Delray Beach, FL 33483  
(561) 990-8198

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Mermaid Fire Sky, 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:

Lisa Addeo  
Name of Person

\_\_\_\_\_  
Firm/Company

335 E. Linton Blvd Ste 1951  
Address

Delray Beach, FLA 33483  
City/State and Zip Code

LisaMusic.com@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Addeo at (561) 990-8198  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

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

② OVER →

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

Mermaid Fire Sky, 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 May 17, 2021 and assigned Florida document number L21000229485

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)**

335 E. Linton Blvd  
Suite 1951  
Delray Beach, FL 33483

**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:

Lisa Addeo

New Registered Office Address:

335 E. Linton Blvd Ste 1951

Enter Florida street address

Delray Beach, Florida 33483

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

2021 AUG 12 PM 3:51

F. Effective date, if other than the date of filing: Immediately (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 8/5, 2021

Kisner  
Signature of a member or authorized

Lisa Adeo

Typed or printed name of signer

**Filing Fee: \$25.00**

✓ MFG →