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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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NAJMY THOMPSON, P.L.

Account Number : I20090000014 : (941)907-3999 : (941)840-5559 Fax Number

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 103 4TH ST LLC

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COVER LETTER

TO: Registration S Division of Co				
103 4TH SUBJECT:	ST LLC			
	Name of Lim	ited Liability Company		
	f Amendment and fee(s) are sub condence concerning this matter			MI M 27 PM 2:05
	Sean Kelly			福马河
		Name of Person		一覧多り
	Najmy Thompson, P.1.,			2.05
		Firm/Company		E. C.
	1401 8th Ave W			ν
		Address		
	Bradenton, FL 34205			
	Cara@beachtobayliving.co	City/State and Zip Code		
		to be used for future annual report notif	ication)	
For further information	concerning this matter, please of	all:		
Deividas Gizys		941 7482216 at ()		
Name	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for	the following amount:			
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
Mailing Addr	<u>255:</u>	<u>Street Address:</u>		

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

iny as it now appears on our records,) Liability Company)	
were filed on 05/25/2021	and assigned
oility company here:	
lity Company," the designation "LLC" o	or the abbreviation "L.L.C."
address on our records, <u>enter th</u>	e name of the new registe
Enter Florida street address	
	ida Zip Code
	address on our records, enter th

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

<u> Title</u>	Name	Address	Type of Action
MGR	Roman Eckert	1401 8th Ave W	≅Add
•		Bradenton, FL 34205	□Remove
			Change
			□Add
			Remove
			Change
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	1 A CEN		(optional	11	
ective date, if other than the effective date is listed, the date mus	t be specific and cannot be prior	to date of filing or more	than 90 days after filin	g.) Pursuant	to 605.0
e: If the date inserted in this blo ument's effective date on the De	ock does not meet the applic spartment of State's records	able statutory ming re	equirements, tins dat	¢ will not b	i iistet
cord specifies a delayed effective s filed.	e date, but not an effective ti	ime, at 12:01 a.m. on	the earlier of: (b)	The 90th day	y after I
July 27 ed	2021	<u> </u>			
Am M. Ihu	w				

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