

L21000277250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

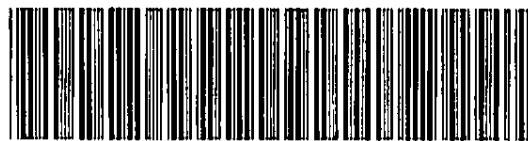
(Business Entity Name)

(Document Number)

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2022 FEB 14 PM 3:18
SECRETARY OF STATE

O SIMMONS

MAR 24 2022



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 16, 2021

LEONARD TITONE MBA CPA
CPA TAX ADVISORS INC
12995 S CLEVELAND AVE SUITE 160
FORT MYERS, FL 33907

SUBJECT: S.THOMAS LLC
Ref. Number: L21000277250

We have received your document for S.THOMAS LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

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) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 221A00030444

2021 DEC 16 PM 2:19

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

S. Thomas LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2022 FEB 11 PM 3:18

SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company were filed on June 15, 2021 and assigned
Florida document number L21000277250

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Sidonne Thomas PLLC

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:

3125 La Costa Cir

(Principal office address MUST BE A STREET ADDRESS)

Apt 204

Naples, FL 34105

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:

CPA Tax Advisors Inc

New Registered Office Address:

12995 S Cleveland Ave Ste 160

Enter Florida street address

Fort Myers

City

Florida 33907

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.

Leonard Titone MBA, CPA
If Changing Registered Agent, Signature of New Registered Agent

[illegible]

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

NA The purpose of the entity is Real Estate


E. 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)

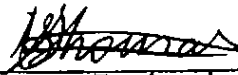
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 November 30, 2021


Signature of a member or authorized representative of a member

Sidonne Thomas


Typed or printed name of signee