

L21 000 2877 00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

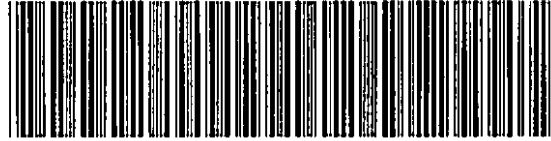
(Document Number)

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000399286430

01/03/23--01017--010 \$25.00

FILED
2023 APR -4 PM 1:45
FBI - JEFFERSON

4/10/2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PELICAN PASS CONDOMINIUMS, 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:

Scott Markowitz

Name of Person

Firm/Company

174 Watercolor Way #103/418

Address

Santa Rosa Beach, FL 32459

City/State and Zip Code

csledge@pierceandshadoan.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Darell R. Pierce

270

782-2500

at (_____) _____

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2023

SCOTT MARKOWITZ
174 WATERCOLOR WAY #103/418
SANTA ROSA BEACH, FL 32459

SUBJECT: PELICAN PASS CONDOMINIUMS LLC
Ref. Number: L21000287700

We have received your document for PELICAN PASS CONDOMINIUMS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

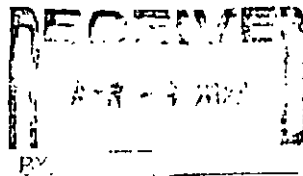
The document must be signed by a member or an authorized representative of a member.

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) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 723A00005833



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

PELICAN PASS CONDOMINIUMS, LLC

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

2023 APR -4 PM 1:45

The Articles of Organization for this Limited Liability Company were filed on 06/21/2021 and assigned

Florida document number L21000287700

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:

174 Watercolor Way #103/418

(Principal office address MUST BE A STREET ADDRESS)

Santa Rosa Beach, FL 32459

Enter new mailing address, if applicable:

174 Watercolor Way #103/418

(Mailing address MAY BE A POST OFFICE BOX)

Santa Rosa Beach, FL 32459

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:

Scott Markowitz

New Registered Office Address:

174 Watercolor Way #103/418

Enter Florida street address

Santa Rosa Beach

, Florida 32459

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

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

[illegible]

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

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 3.27, 2023.

Signature of a member or authorized representative of a member

Scott A. Markowitz
Typed or printed name of signee