

L21000301733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

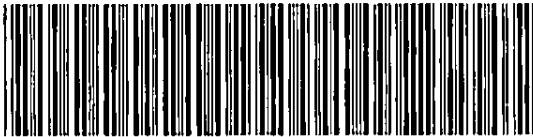
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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APR 18 2023

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2023 APR 18 AM 9:11  
SECRETARY OF  
TALLAHASSEE

RECEIVED  
2023 APR 18 PM 3:52  
ATTORNEY GENERAL

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

TALLAHASSEE, FL 32309

(850) 524-5437

(850) 524-6243

Please use funds from this account: I20210000160: \$ 30.00

Authorization Signature: *Jan Fulle* :  
3220 S FISKE BLVD, LLC L21000301733

BUSINESS NAME DOCUMENT #

Certified Copy of Articles of Organization

Certificate of Status

**NEW FILINGS**

- Profit Corp
- Not for Profit
- Limited Liability
- Domestication
- Other
- CORP
- LLLP

**AMMENDMENTS**

- Amendment**
- Resignation of R.A. Officer/Director
- Change of Registered Agent
- Revocation of Dissolution
- Merger
- Conversion
- Amended and restated Articles
- Statement of Authority

**OTHER FILINGS**

- Annual Report
- Fictitious Name
- APOSTILLE
- Country

**REGISTRATION/QUALIFICATIONS**

- Foreign filing
- Limited Partnership
- Reinstatement
- Other

EXAMINER'S INITIALS: \_\_\_\_\_

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**EXAMINER'S INITIALS:** \_\_\_\_\_

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 3220 S FISKE BLVD, 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:

Mary Batista  
Name of Person

Firm/Company

3309 NE 33 Street  
Address

Fort Lauderdale, FL 33308  
City/State and Zip Code

mary.batista@realpro.com ; raffaelociciola@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Batista at (954) 557-4257  
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

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

SECRETARY OF STATE  
TALLAHASSEE  
2023 APR 18 AM 9:11  
D

3220 S FISKE BLVD, 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 June 30, 2021 and assigned Florida document number L21000301733.

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)

1233 South Atlantic Avenue #407

Daytona Beach, FL 32118

**Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

1233 South Atlantic Avenue #407

Daytona Beach, FL 32118

**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: Raffaello Ciciola

New Registered Office Address: 1233 South Atlantic Avenue #407  
*Enter Florida street address*

Daytona Beach Florida 32118  
*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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Mary Batista	3309 NE 33 Street, Fort Lauderdale FL 33308	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Raffaello Ciciola	1233 South Atlantic Avenue #407	<input checked="" type="checkbox"/> Add
		Dayotna Beach, FL 32118	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Lined area for amending information.

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 3/21, 2023

Handwritten signature of RAFAELO CICCIOIA

Signature of a member or authorized representative of a member

RAFAELO CICCIOIA

Typed or printed name of signee