

221 600 312 683

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

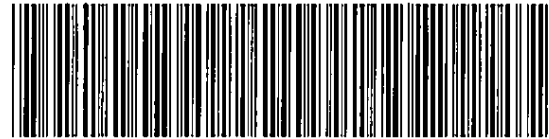
(Business Entity Name)

(Document Number)

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CLERK OF COURT
JANUARY 1, 2024
TALLAHASSEE, FL

[Handwritten signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 16, 2023

PRIVATE FINANCING ALTERNATIVES LLC
14608 N DALE MABRY HWY
TAMPA, FL 33618-4200

SUBJECT: PRIVATE FINANCING ALTERNATIVES LLC
Ref. Number: L10000076549

We received this check with no attachments. To prevent delays in filing and improper application of fees, please return the check together with the appropriate document for processing.

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.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 723A00026558

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TALLAHASSEE, FL
DIVISION OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPRING HILL COUNTY LINE, 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:

check sent in
separate envelope
from: private financing
alternatives LLC
memo: 218-Spring Hill
dated 11/10/23 \$25.00

Joseph DiGerlando

Name of Person

Firm/Company

14608 N Dale Mabry Hwy

Address

Tampa FL 33618

City/State and Zip Code

floridacuitycapital@hotmail.com

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

For further information concerning this matter, please call:

Gabriella C. Perez, Esq.

Name of Person

at (813) 9618715

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

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

SPRING HILL COUNTY LINE, 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 07/08/2021 and assigned
Florida document number L21000312683.

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)

Joseph DiGerlando

14608 N. Dale Mabry Hwy

Tampa FL 33618

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Joseph DiGerlando

14608 N. Dale Mabry Hwy

Tampa FL 33618

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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:

Joseph DiGerlando

New Registered Office Address:

14608 N. Dale Mabry Hwy

Enter Florida street address

Tampa

City

Florida 33618

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

At the meeting authorized persons, 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	Bryan Schultz	6414 Montclair Bluff Lane	<input type="checkbox"/> Add
		Windermere, FL 34786	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	John B Williams	6083 SHADBURN FERRY ROAD	<input type="checkbox"/> Add
		BUFORD, GA 30518	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	John R Park	5280 Riverview Road	<input type="checkbox"/> Add
		Sandy Springs, GA 30327	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Joseph DiGerlando	14608 N. Dale Mabry Hwy	<input checked="" type="checkbox"/> Add
		Tampa FL 33618	<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
			<input type="checkbox"/> Change

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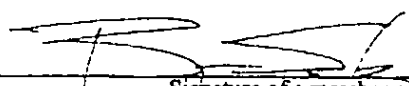
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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 _____, _____.



Signature of a member or authorized representative of a member

Bryan Schultz

Typed or printed name of signee