

L21 000 329073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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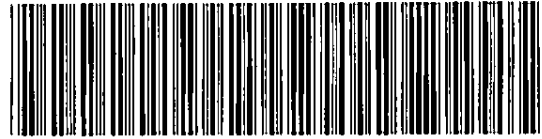
(Business Entity Name)

(Document Number)

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STATE
TALLAHASSEE, FL

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JAN 3 2024
AM 11:12
TALLAHASSEE, FL

R. HUNT

01/03/24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Trident Property Development 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:

Joel A. Threlkeld, Esq.

Name of Person

Threlkeld Law, P.A.

Firm/Company

3003 Tamiami Trail N., Suite 400

Address

Naples, FL 34103

City/State and Zip Code

joel@napleslegal.net

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

For further information concerning this matter, please call:

Joel A. Threlkeld, Esq.

at (239) 234-5034

Name of Person

Area Code

Daytime Telephone Number

STATE
TALLHASSEE, FL

7-1-03 AM 10:33

10

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**

TRIDENT PROPERTY DEVELOPMENT 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 July 20, 2021 and assigned
Florida document number L21000329073.

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:

20533 Biscayne Blvd.

(Principal office address MUST BE A STREET ADDRESS)

Aventura, FL 33180

Enter new mailing address, if applicable:

20533 Biscayne Blvd.

(Mailing address MAY BE A POST OFFICE BOX)

Aventura, FL 33180

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:

Threlkeld Law, P.A.

New Registered Office Address:

3003 Tamiami Trail N., Suite 400

Enter Florida street address

Naples


Florida 34103

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>
AMBR	Whalen, Michael	2400 Davis Blvd., Suite 101	<input type="checkbox"/> Add
		Naples, FL 34104	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Portmann, Thomas	20533 Biscayne Blvd.	<input type="checkbox"/> Add
		Aventura, FL 33180	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	TN Capital Investments, LLC	20533 Biscayne Blvd.	<input checked="" type="checkbox"/> Add
		Aventura, FL 33180	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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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.)*

REC-1-3 AM 10:33
U.S. STATE
DEPT. AL

1-3 AM 10:33
STATE
OFFICE, PL

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 January 3 2024

Signature of a member on _____

Signature of a member or authorized representative of a member

Joel A. Threlkeld, Esq., Attorney for Trident Property Development LLC

Typed or printed name of signee

Filing Fee: \$25.00