Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document

(((H23000242367 3)))



H230002423673ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ARSENAULT LAW OFFICES

Account Number : 075350000225 Phone : (727)584-1199 Fax Number : (727)586-1071

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: mandi@ alufla.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BEACHWISE REAL ESTATE LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

GEORETIARY OF STATE ORIFIC

APPROVEI

Electronic Filing Menu

Corporate Filing Menu

Help

Tallahassee, FL 32314

COVER LETTER

	Registration Se Division of Cor					
SUBJEC		Real Estate LLC., a Florida lim	ited liability company			
SUBJEC	-1:	Name of Limi	ted Liability Company			
The enclo	osed Articles of	Amendment and fee(s) are subn	nitted for filing.			
Please re	tura all correspo	ndence concerning this matter t	o the following:			
		Kenneth G. Arsenault, Jr., E	2squire			
			Name of Person			
		Arsenault Law Offices, P.A				
			Firm/Company			
		19535 Gulf Blvd., Suite E				
		Address				
		Indian Shores, FL 33785				
			City/State and Zip Code			
		mandi@alofla.com				
For firth	er information c	e-mail address: (to oncerning this matter, please ca	o be used for fixure annual repo	n nouncation)		
	G. Arsenault, Jr		727 584-11	99		
	Name of		at ()	Daytime Telephone Number		
	T (MILES O					
Enclosed	is a check for th	ne following amount:				
■ \$ 25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Addres		Street Addre			
	Registration S Division of C		Registratio Division of	n Section f Corporations		
	P.O. Box 632	7	The Centre	of Tallahassee		
•	Tallahassee, I	FL 32314	2415 N. M	onroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Beachwise Real Estate LLC., a Flo		, , ,			
(Name of the Lim	(A Florida Limited	nny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited	Liability Company	were filed on July 21, 2021	and assigned		
Florida document number L21000333438					
This amendment is submitted to amend the fol	llowing:				
A. If amending name, enter the new name	of the limited llab	ility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		600 Cleveland Street			
(Principal office address MUST BE A STRE		Suite 209			
(11 melph office white the 12 dos of 12 dos of 12 dos		Clearwater, FL 33755			
Enter new mailing address, if applicable:		600 Cleveland Street			
(Mailing address MAY BE A POST OFFICE BOX)		Suite 209			
		Clearwater, FL 33755			
B. If amending the registered agent and/or agent and/or the new registered office addr. Name of New Registered Agent:			name of the new registere		
Name of New Registered Agent.	IACAC COLEDI-		2316 - 11 2>		
New Registered Office Address:	19535 Gulf Blv	Enter Florida street address			
	Indian Shores	, Florida	1337855 3		
		City	Zig 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>	Address	Type of Action
MGR	Don Gerald Pingaro, II	10837 Garden Ridge Ct.	□Add
		Davie, FL 33328	■Remove
			□Change
MGR	Vivian Smith	600 Cleveland Street	🖸 Add
		Suite 209	□Remove
		Clearwater, FL 33755	■Change
MGR Kristin Vincelli	Kristin Vincelli	600 Cleveland Street	
		Suite 209	□Remove
		Clearwater, FL 33755	□Change
			□Add
			□ Remove
			CChange
			□Remove
			Change
			□Add
			□Remove
			□ Change

	·-~	· · · · · · · · · · · · · · · · · · ·		
		~ 		
	· · · · · - · · · · · · · · · · · · · · · · · · ·			
				
				·
				
			•	
		·····	-	
ffective date, if other than the an effective date is listed, the date must lote: If the date inserted in this bloocument's effective date on the De	ock does not meet the applic	able statutory filing	(optiona re than 90 days after filir requirements, this da	l) g.) Pursuant to 605.020 te will not be listed at
record specifies a delayed effective is filed.	e date, but not an effective t	ime, at 12:01 a.m. o	n the carlier of: (b)	The 90th day after the
ated	2023.	·		
Kri:	stin Vincelli			

Filing Fee: \$25.00