

121 000 382859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

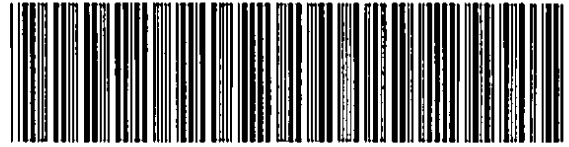
(Business Entity Name)

(Document Number)

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2021 NOV 19 AM 7:52  
SECRETARY OF STATE  
TALLAHASSEE, FL

O SIMMONS  
DEC 07 2021

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Isle of Freedom 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:

Cindy Burns

Name of Person

Lamar and Burns

Firm/Company

6151 Riverwalk Ln. ste #8

Address

Jupiter Florida 33458

City/State and Zip Code

cindy.lamartax@gamil.com

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

For further information concerning this matter, please call:

Cindy Burns

561 250-6311

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

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

2021 NOV 19 AM 7:52

Isle of Freedom LLC.

SECRETARY OF STATE

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

The Articles of Organization for this Limited Liability Company were filed on 08/26/2021 and assigned  
Florida document number 121000382859.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

New Registered Office Address:

*Enter Florida street address*

\_\_\_\_\_, Florida

*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	Brent K Delancy	16900 North Bay Road	<input type="checkbox"/> Add
		Apt 1001	<input type="checkbox"/> Remove
		Sunny Isles Fl 33160	<input checked="" type="checkbox"/> Change
AMBR	Albert Capelline	14126 Pavestone Terrace	<input checked="" type="checkbox"/> Add
		Delray Beach Fl 33446	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Todd Thompson	5100 NW 75th Place	<input type="checkbox"/> Add
		Pompano Beach Fl 33073	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	George Petorelli	2361 NW 30th St.	<input checked="" type="checkbox"/> Add
		Boca Raton Fl 33413	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Eleythera Surveys & Mapping	601 N Federal Highway	<input type="checkbox"/> Add
		Apt.401	<input checked="" type="checkbox"/> Remove
		Pompano Beach Fl 33062	<input type="checkbox"/> Change
AMBR	Pavestone Group LLC.	1193 W Newport Center Dr.	<input type="checkbox"/> Add
		Deerfield Beach Fl 33442	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

AMBR Antoine Fernander

601 N Federal Highway Apt. 401 Pompano Beach FL 33062

ADD

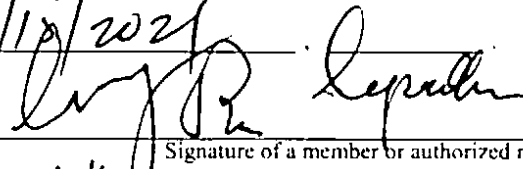
**E. Effective date, if other than the date of filing:** 11/15/2021 (optional)

(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

11/15/2021  


Signature of a member or authorized representative of a member

Albert R. Caspellini

Typed or printed name of signer

**Filing Fee: \$25.00**