

121 000438198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

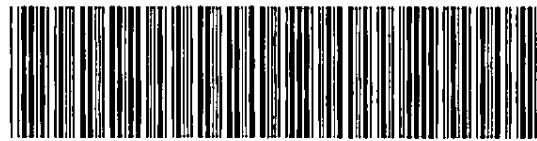
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800380067168

FILED
2022 JAN 24 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FL

Y. SCOTT

JAN 29 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TROPICAL POWERSPORT RENTALS, 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:

Joshua Suriano

Name of Person

Firm/Company

~~917 Bloomingdale Drive~~

210 Aberdeen St

Address

~~Davenport, FL 33897~~

Davenport, FL 33897

City/State and Zip Code

~~TropicalPowersports@gmail.com~~

JSuriano@SurianoLaw.com

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

FILED
2022 JAN 24 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Joshua Suriano

Name of Person

at

609

Area Code

576-2452

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

TROPICAL POWERSPORT RENTALS, 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 OCTOBER 6, 2021 and assigned
Florida document number L21000438198.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Suriano Logistics, LLC
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)

210 Aberdeen Street
Davenport, FL 33896

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as above

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:

Joshua Suriano

New Registered Office Address:

210 Aberdeen Street

Enter Florida street address

Davenport, Florida 33896

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	DANIEL SURIANO	917 Bloomingdale Drive	<input type="checkbox"/> Add
		Davenport, FL 33897	<input checked="" 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
			<input type="checkbox"/> Add
			<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

FILED
2022 JAN 24 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FL


2022 JAN 24 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FL

FILED
2022 JAN 24 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FL

(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated January 17th 2022.


Signature of a r

Signature of a member or authorized representative of a member

Joshua Suriano

Typed or printed name of signee