Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NADMY THOMPSON, P.L.

Account Number : I20090000014 : (941)907-3999

Fax Number : (941)840-5559

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

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 106 9TH ST S LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

OCT 22 2021

A. LUNI

#### **COVER LETTER**

TO:	Registration Se Division of Cor				
eun ica	106 9TH S				
ZORTE	CT;	Name of Lim	ited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		Sean Kelly			
			Name of Person		
		Najmy Thompson, P.L.			
			Firm/Company		
		1401 8th Ave W			
			Address	<u>.                                    </u>	<del></del>
		Bradenton FL 34205			
			City/State and Zip Code		
		cara@heachtobayliving.con	to be used for future annual		ation
For furth	ner information o	concerning this matter, please of		report nonne	anony
		one on the same of		2216	
Scan Kelly		941 748 at () Area Code	52210	P. J. L N1	
	Name o	of Person	Area Code	Daytime !	l elephone Number
Enclosed	d is a check for t	he following amount:			
<b>□ \$</b> 25.	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee of Certified Copy (additional copy is ence		☐ \$60.00 Filing Fce, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres		Street A		ion
	Registration 3 Division of C		_	ation Sect n of Corpe	
	P.O. Box 632			ntre of Ta	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

106 9TH ST S LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) Florida document number \_ L21000452735 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 207 65th LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LI.C" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 102 48th St Holmes Beach, FL 34217 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

### 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	
AMRR =	Authorized Member	

Title	Name	Address	Type of Action
			□Remove
			[]Change
	A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
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Filing Fee: \$25.00