Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000006 : (407)425-7010 : (407)425-2747 Fax Number

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

Email Address: corporate@zkslawfirm.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SAN MARCO PROPERTY LLC

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Help



COVER LETTER

TO: Registration Se Division of Cor			
	CO PROPERTY LLC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of .	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspo	ndence concerning this matter to	o the following.	
	Christine L. Weingart, Esq.		
		Name of Person	
	Zimmerman, Kiser & Sutcli	iffe, P.A.	
		Firm/Company	
	315 E. Robinson Street, Sui	te 600	of Person Company Iddress and Zip Code r future annual report notification) Atea Code Daytime Telephone Number Do Filling Fee & S60.00 Filling Fee, Certificate of Status & Certificate of Status &
	Name of Person Zimmerman, Kiser & Sutcliffe, P.A. Firm/Company 315 E. Robinson Street, Suite 600 Address Orlando, FL 32801 City/State and Zip Code corporate@zksławfirm.com E-mail address (to be used for future annual report notification) aformation concerning this matter, please call.		
	Orlando, FL 32801		
		City/State and Zip Code	
	•	be used for future annual report notific	cation)
For further information of			
	Ameerical construction pieuse ou		
Eileen Soto			
Name o	of Person	Area Code Dayume	Telephone Number
Enclosed is a check for the	he following amount.		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
<u>Mailing Addre</u> Registration			tion

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

SAN MARCO PROPERTY LLC		
(Name of the Limited Liab (A Flor	nility Company as it now appears on our records.) Inda Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L21000457690	Company were filed on 10/20/2021	and assigned
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "L	Limited Liability Company," the designation "LLC" or th	c abbreviation "L.L.C"
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD)	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe agent and/or the new registered office address here		Ma = 2. ~~
Name of New Registered Agent:		- -
New Registered Office Address:	Enter Florida street address	15 E
	Florida	TE 300
	City	⊃e 1Zıp Code ⇔ ∵ ω
New Registered Agent's Signature, if changing Registe	ered 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 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>	Type of Action
MGR	Shankar Krishnamurthi	2943 Spring Park Road	
	_ · <u>_</u>	Jacksonville, F1, 32207	□Remove
			■ Change
			□Remove
			☐ Change
			☐ Add
			Remove
			Change
			☐Add
			□Remove
			□Change
			□Remove
			□Change
			_ Add
			□Remove
			□ Chance

f amending any other informa	tion, enter change(s) h	iere: (Attach add	ditional sheets, if nece	ssary.)	
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Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this bedocument's effective date on the E	lock does not meet the ap Department of State's reco	oplicable statutory ords	filing requirements, this	filmg) Pursuant to s date will not be	listed as
record specifies a delayed effecti d is filed.	ve date, but not an effecti	ve time, at 12.01 a	.m. on the earlier of. (b	16 ger ;=-,	
November 19	2021			7:44 E	* :
	Chimbles We	viegosol		St. 1 A. S. P. S. IA. S. S. P. C. C. B. B. A. C. C. B. B. B. B. C. B. B. B. B. C. B.	riceu
	Signature of a member or	authorized represent	ative of a member	<u> </u>	
Christine L. Weingart				71/2: 3	5
	Typed or	printed name of sign	ice -	2 2 3	_

Filing Fee: \$25.00