## 121000510965

Office Use Only



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DIVISION OF CONFIDENTIONS
22 APR 15 PH 3: 35

T. MATTHEWS MAY 19 2022

## **COVER LETTER**

Division of Corp			
SUBJECT:	Evict A Cri-	ter LLC	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Daniel	Santuchi Name of Person	
		A Critter LI Firm/Company	
	305 E	Beach St Address	
	Grove and	City/State and Zip Code  + uchi 10 6 sma 1  to be used for future annual report no	736 1. com
For further information as	E-mail address: (i oncerning this matter, please ca		otification)
For lutther information ed			
Daniel Name of	Person	at (35Z) 348 Area Code Dayti	- 75 45 ime Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Malling Address	••	Straat Address	

Malling 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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

22 APR 15 PM 3: 35

( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 21000510965</u> .	were filed on $\frac{12/2/2021}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)	305 E Beach Street Groveland FL 34736
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	305 F Beach Street Gruveland FL 34736
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new register</u>
Name of New Registered Agent: DGL	niel Santuchi
New Registered Office Address: 305	E Beach Street  Enter Florida street address
Grove	E Beach Street  Enter Florida street address  Gity Florida 34736  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>	Type of Action
MGR	Francisco F Rodriguez JR	2316 Pine Ridge Rd unit #30 Naples, FL 34109	<u> </u>
•	ROBITISUEZ JA	Naples, FL 34109	DRemove
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Signature of a member or authorized representative of a member						
Signature of a member or authorized representative of a member	ated		_ ,	一· / /		
	ated		-, <u> </u>			
Daniel Santuchi Typed or printed name of signee	ated	Signature of	a member or autho	prized representative	of a member	