

L21000533457

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000221542 3)))



H240002215423ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : COTTRELL TAX & ACCOUNTING, LLC
Account Number : 120230000179
Phone : (239)449-4881
Fax Number : (239)591-2359

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PROJECT & BUSINESS DEVELOPMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

JUN 28 2024

RECEIVED

2024 JUN 27 AM 11:52

FLORIDA
DIVISION OF CORPORATIONS
DEPARTMENT OF STATE

RECEIVED
FLORIDA
DIVISION OF CORPORATIONS
DEPARTMENT OF STATE

2024 JUN 27 AM 3:14

FILED

((H24000221542 3))



June 27, 2024

FLORIDA DEPARTMENT OF STATE

Division of Corporations

PROJECT & BUSINESS DEVELOPMENT, LLC
4490 5TH AVENUE NW
NAPLES, FL 34119US

SUBJECT: PROJECT & BUSINESS DEVELOPMENT, LLC
REF: L21000533457

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The form you submitted is for a The fax audit sheet submitted is for an LLC Registered Agent change form, but the form submitted is for an LLC amendment. Please submit an LLC Reg, but your entity is a istered Agent Change form.. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H24000219057
Letter Number: 524A00014074

((H24000221542 3))

((H24000221542 3)))

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Project & Business Development, 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:

BJ Cottrell
Name of Person
Cottrell Tax & Associates, LLC
Firm/Company
5633 Naples Blvd
Address
Naples, FL 34109
City/State and Zip Code
admin@cta.tax
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BJ Cottrell 239 449-4881
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

((H24000221542 3)))

(((H24000221542 3)))
**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

PROJECT & BUSINESS DEVELOPMENT, 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 12/20/2021 and assigned
Florida document number L21000533457

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:

Cottrell Tax & Associates, LLC

New Registered Office Address:

5633 Naples Blvd

Enter Florida street address

Naples

City

Florida 34109

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.

(((H24000221542 3)))



If Changing Registered Agent, Signature of New Registered Agent

((H24000221542 3))

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>
			<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2024 JUN 21 AM 3:14
FILED
TALLAHASSEE COUNTY

((H24000221542 3))

