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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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JAN 21 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 810 SKY LAKE COURT 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:

FRANK VASALLO ESQ

\_\_\_\_\_  
Name of Person

VASALLO & VASALLO PA

\_\_\_\_\_  
Firm/Company

8796 SW 8 ST

\_\_\_\_\_  
Address

MIAMI, FL 33174

\_\_\_\_\_  
City/State and Zip Code

FRANK@VASALLOPA.COM

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

For further information concerning this matter, please call:

FRANK A. VASALLO, ESQ

305 224-8900  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

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 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**

810 SKY LAKE COURT 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 01/06/2022 and assigned  
Florida document number 100379145781.

This amendment is submitted to amend the following:

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

810 SKY LAKE CIRCLE 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)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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 \_\_\_\_\_

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**

4

**MGR = Manager**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
1. The first action is to identify the problem.	John Doe	123 Main St, New York, NY 10001	Problem Identification
2. The second action is to analyze the problem.	Jane Smith	456 Elm St, Los Angeles, CA 90001	Problem Analysis
3. The third action is to develop a solution.	Bob Johnson	789 Oak St, Chicago, IL 60601	Solution Development
4. The fourth action is to implement the solution.	Alice Brown	101 Pine St, San Francisco, CA 94101	Solution Implementation
5. The fifth action is to evaluate the results.	Charlie Davis	202 Maple St, Houston, TX 77001	Results Evaluation

Scenario	Initial State	Final State	Operation
1	...	...	<input type="checkbox"/> Add
2	...	...	<input type="checkbox"/> Remove
3	...	...	<input type="checkbox"/> Change
4	...	...	<input type="checkbox"/> Add
5	...	...	<input type="checkbox"/> Remove
6	...	...	<input type="checkbox"/> Change
7	...	...	<input type="checkbox"/> Add
8	...	...	<input type="checkbox"/> Remove
9	...	...	<input type="checkbox"/> Change
10	...	...	<input type="checkbox"/> Add
11	...	...	<input type="checkbox"/> Remove
12	...	...	<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**