

W22000030877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
22 JUL 21 PM 3:02

T. MATTHEWS

JUL 27 2022



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2022 JUL 21 AM 10:12

July 11, 2022

ROB MCCORMACK  
1776 HAMMOCK DRIVE  
FERNANDINA BEACH, FL 32034

SUBJECT: ANDES STR FL BROKERAGE, LLC  
Ref. Number: L22000030877

We have received your document for ANDES STR FL BROKERAGE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If amending authorized person(s) authorized to manage you must enter the title, name, and ADDRESS of each person being added to our records.

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) 245-6050.

Tekayla T Matthews  
OPS

Letter Number: 422A00015287

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Andes STR FL Brokerage 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:

Rob McCormack

Name of Person

Andes STR, Inc.

Firm/Company

1776 Hammock Drive

Address

Fernandina Beach, FL 32034

City/State and Zip Code

rob@andstr.com

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

For further information concerning this matter, please call:

Rob McCormack

650 305-9030  
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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

(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 01/27/2022 and assigned Florida document number 1.22000030877.

**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)**

### Park Hill Place

830 North John Young Parkway

Kissimmee, Florida 34741

**Enter new mailing address, if applicable:**

***(Mailing address MAY BE A POST OFFICE BOX)***

1776 Hammock Drive

Fernandina Beach, FL 32034

**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

Civ.

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**



**D. If amending any other information, enter change(s) here:** (Attach additional sheets, if necessary)

Susan Kathleen Trover has been named Secretary of Andes STR FL Brokerage LLC. Please list her accordingly on Sunbiz.org.

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
22 JUL 21 PM 3:02

Park Hill Place  
830 N John Young Parkway  
Kissimmee FL ~~34741~~ 34741

**E. Effective date, if other than the date of filing:** 05/03/2022 (optional)

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated May 3rd, 2022



Signature of a member or authorized representative of a member

Robert C. McCormack, Jr.

Typed or printed name of signee

**Filing Fee: \$25.00**