LZ2000060450

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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2022 MAY 18 PM 3: 17
SEURE TARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TARA & SIESTA LL C 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:
PETER J. BRADLEY Name of Person
Firm/Company
6310 POSITANO CT.
SARASOTA, FL 34243 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PETER BADLEY Name of Person Area Code Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$ \$60.00 Filing Fee, \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$\$ \$Certified Copy \\ \text{(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

FILED

2022 HAY 18 PH 3: 1.7

SECRETARY OF STATE TALLAHASSEE, FL TARA @ SIESTA LLC

(A Florida Limited L	
The Articles of Organization for this Limited Liability Company $\frac{1}{2200060450}$	were filed on $\frac{OL/O4/2022}{}$ and assigned
This amendment is submitted to amend the following:	
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 "LLC." Iter new principal offices address, if applicable: Inincipal office address MUST BE A STREET ADDRESS) Iter new mailing address, if applicable: Inincipal address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered	
The new name must be distinguishable and contain the words "Limited Liabili	ty 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)	
amendment is submitted to amend the following: amending name, enter the new name of the limited liability company here: It we name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." It new principal offices address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Pegistered 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 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 Type of Action Address Title Name MER CHARRON, PAMELA ______ 🗀 Add 1515 RINGLING BLAD., SIE 320 MREMOVE SARASOTA FL 34236 Change MGR DE SARNO CHERI ______ ___ ___ ___ _Add 1515 RINGLING BLAZ STE 320 KREMOVE SARASOTA FL 34236 OCHange □Add _____ □Remove □Remove □Remove ______ [] Add □Remove

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If an effective date is Note: If the date	f other than the date of disted, the date must be spe inserted in this block do ive date on the Departm	ecific and cannot be prio ses not meet the applic	r to date of filing or more cable statutory filing	(option to than 90 days after the requirements, this c	ing.) Pursuant to 605.0	207 (3 I as th
e record specifies and is filed.	a delayed effective date,	, but not an effective t	time, at 12:01 a.m. o	the earlier of: (b)	The 90th day after t	the
Dated <u>05/</u> 0	19/2022		·			
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