

122000088059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

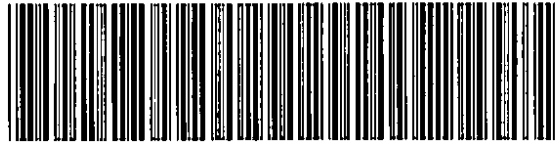
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2022 MAR 15 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FL

Y. SCOTT

MAR 29 2022

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: 315 LEEWARD, 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:

MICHAEL SMITH

Name of Person

Firm/Company

425 SE 1ST ST

Address

POMPANO BEACH FL 33060

City/State and Zip Code

BRIAN@PIVOTALKEY.COM

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

For further information concerning this matter, please call:

BRIAN CARDOZO

561

2876000

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

SECRETARY OF STATE
TALLAHASSEE, FL

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

315 LEEWARD 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 01/18/2022 and assigned
Florida document number L22000088059.

This amendment is submitted to amend the following:

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

222 WARD LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

425 SE 1ST ST #A502

POMPANO BEACH FL 33060

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

425 SE 1ST ST #A502

POMPANO BEACH FL 33060

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:

MICHAEL SMITH

New Registered Office Address:

425 SE 1ST ST #A602

Enter Florida street address

POMPANO BEACH

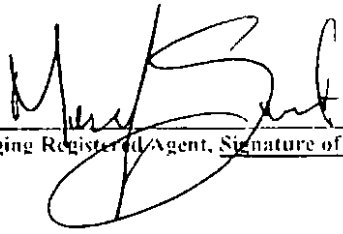
Florida 33060

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

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>
AMBR	BRIAN CARDOZO	425 SE 1ST ST #A602	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
		POMPANO BEACH FL 33060	<input type="checkbox"/> Change
AMBR	MICHAEL SMITH	425 SE 1ST ST #A602	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		POMPANO BEACH FL 33060	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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TALLAHASSEE, FL
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remove
Change
Add
Remove

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SECRETARY OF STATE
BELLINGHAM, WASH

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SECRETARY OF STATE
TALLAHASSEE FL

(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

BRIAN CARDOZO
Typed or printed name of signer

Filing Fee: \$25.00