177000092851

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
JUL 2 2 2027
A. LUNI
missing Das signature Office Use Only



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05/06/22--01017--012 **25.00

SHOSETARY OF STATE



June 30, 2022

NUMO MORAIS LL GABBIANO DELRAY BEACH LLC 802 N SWINTON AVE DELRAY BEACH, FL 33444

SUBJECT: LL GABBIANO DELRAY BEACH LLC

Ref. Number: L22000092851

We have received your document for LL GABBIANO DELRAY BEACH LLC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Your document was incomplete.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6939.

Agnes Lunt Regulatory Specialist III

www.sunbiz.org

DO DOV GOOD TO U.S. TU ST COOK

Letter Number: 322A00014757

COVER LETTER

CHANGIN SUBJECT:	G COMPANY NAME OF LL	GABBIANO DELRAY BEA	ACH LLC	
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	NUNO MORAIS			
		Name of Person		
	LL GABBIANO DELRAY	BEACH LLC		
	-	Firm/Company		
	802 N SWINTON AVE		1	
		Address		
	DELRAY BEACH			
		City/State and Zip Code		
	FLORIDA 33444			
		to be used for future annual repo	ort notification)	
For further information of	oncerning this matter, please ca	all:		
NUNO MORAIS		347 407 32	:66	
Name o	f Person	at () Area Code I	Daytime Telephor	ne Number
Enclosed is a check for the	ne 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:

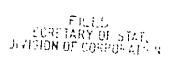
TO:

Registration Section
Division of Corporations

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



2022 JUL 22 AM 11: 27

LL GABBIANO DELRAY BEACH 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 I	Liability Compa	any were filed on $\frac{02/14/2022}{}$	and assigned
Florida document number 1.22000092851			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited l	iability company here:	
il Gabbiano Delray Beach LLC			÷
The new name must be distinguishable and contain the	words "Limited L	iability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	NA	
(Principal office address MUST BE A STRE		2	
Enter new mailing address, if applicable:		NA	
Mailing address MAY BE A POST OFFICE	(BOX)		
3. If amending the registered agent and/or gent and/or the new registered office address.	_	ce address on our records,	enter the name of the new registere
Name of New Registered Agent:	NA		
New Registered Office Address:	NA		
	 	Enter Florida street	address
	NA		Florida
		City	, Florida Zip Code

sereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability mpany 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>	Address	Type of Action
			□ Add
			□Remove
			☐ Change
		· · · · · · · · · · · · · · · · · · ·	□Add
		Remove	
		□Change	
		□ Add	
			□Remove
		□Change	
		□Add	
		□Remove	
			□Change
		□Add	
	 	□Remove	
			□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
I'm requesting the exercition of
LL - in LL DELRAY BEACH
FOR:
IL GABBIANODELRAY BEACH LLC
(THE FIRST LETTER IS SUPPOSED TO BE AN "I" NOT AN "L"
THANK YOU
<u> </u>
J *
E. Effective date, if other than the date of filing: (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)(1) 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.
f 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 ecord is filed.
Dated DELRAY BEACH. 7/11/82 Signature of a member or authorized representative of a member
NUNO MORALS Typed or printed name of signee