

L22000125038

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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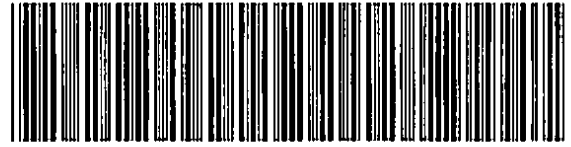
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DEPT. OF TREASURY
TALLAHASSEE, FLORIDA

2022 JUL -5 AM 10:53

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S. PRATHER

LAW OFFICES
MOSKOWITZ, MANDELL & SALIM, P.A.

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FORT LAUDERDALE, FLORIDA 33334

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ALSO ADMITTED IN MA**
ALSO ADMITTED IN NY & CT*
ALSO ADMITTED IN NY*
FLORIDA SUPREME COURT CERTIFIED
CIRCUIT CIVIL MEDIATOR¹

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(1953-2022)

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OF COUNSEL

SHIRLEY D. WEISMAN, P.A.

William G. Salim, Jr.
wsalim@mmsslaw.com
Direct (954) 776-9213

June 29, 2022

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

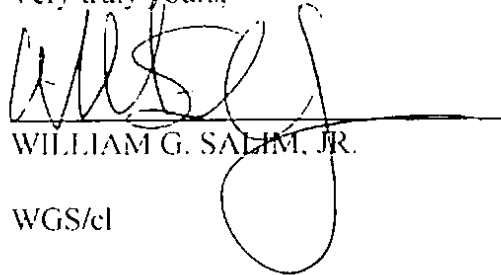
Re: 6581 Southern Blvd WPB, LLC Name Change
Document No. 1.22000125038

Dear Sir or Madam:

Enclosed for filing please find Articles of Amendment of Articles of Organization of 6581 Southern Blvd WPB, LLC together with our check in the amount of \$25.00 in payment of the filing fee.

Should you have any questions concerning this matter, please do not hesitate to contact the undersigned.

Very truly yours,



WILLIAM G. SALIM, JR.

WGS/cl

Enclosure

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 6581 SOUTHERN BLVD WPB, 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:

ARTURO SCROGGIE

Name of Person

BERMUDA LANDSCAPE & DESIGN, INC.

Firm/Company

555 N. CONGRESS AVENUE, SUITE 301

Address

BOYNTON BEACH, FL 33426

City/State and Zip Code

ART@BERMUDALANDSCAPE.COM

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

For further information concerning this matter, please call:

ARTURO SCROGGIE

561 239-2302
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**

6581 SOUTHERN BLVD WPB, 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 MARCH 11, 2022 and assigned
Florida document number L22000125038

2022 JUL -5 AM 10:53
FILED
TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

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

150 NORTH CLEARY ROAD, 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

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

[illegible]

[illegible]

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.

Dated JUNE 29 0, 2022

Typed or printed name of signee

2022 JUL -5 AM 10:53

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Filing Fee: \$25.00