

L22000194678

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

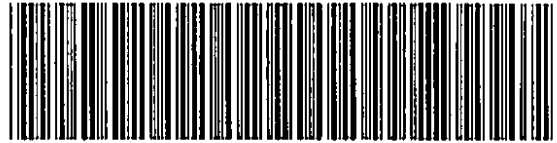
(Business Entity Name)

(Document Number)

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2022 AUG 26 AM 10:21
STATE
TAMPA-40 SEP 11

10/20/22

COVER LETTER

**TO: Registration Section
Division of Corporations**

JJ Sunny Isles Properties LLC

SUBJECT: _____
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:

Krzysztof Jablonski

Name of Person

JJ Sunny Isles Properties LLC

Firm/Company

3723 Sharondale Dr

Address

Sarasota, Florida, 34232

City/State and Zip Code

sunnyislesproperties@gmail.com

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

For further information concerning this matter, please call:

Krzysztof Jablonski

908 3577194

Name of Person

at (_____) _____

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**

JJ Sunny Isles Properties LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2022 AUG 26 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 04/18/2022 and assigned
Florida document number 122000194678.

This amendment is submitted to amend the following:

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

Say La Vie Rentals 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)

3723 Sharondale Dr

Sarasota

Florida, 34232

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3723 Sharondale Dr

Sarasota

Florida, 34232

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

[illegible]

2022 AUG 26 AM 10:21
SHERIFF AND COUNTY STATE
JULIA A. GETH.

2022 AUG 26 AM 10:21
SEN. FRANK R. STALE
1011 A - A EXT. 11

10

(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)

Dated August 17 2022

Krzysztof Jablonski
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00