

122000206503

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

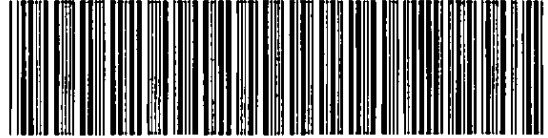
Special Instructions to Filing Officer:

\*customer called on 1/24/25 to proceed  
with articles.\*

J DENNIS

JAN 26 2023

Office Use Only



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2022 OCT 21 4:11:19 PM

FILED  
SECRETARY OF STATE  
2022 OCT 21 4:11:19 PM

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Gulfside Lending Group 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:

Herb Johnson  
Name of Person

Gulfside Lending Group LLC  
Firm/Company

4163 Diaz Ct  
Address

Herrando Beach FL 34607  
City/State and Zip Code

Emailing Herb@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Herb Johnson at (573) 578-4256  
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**

Gulfside Lending Group 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 5/2/2022 and assigned Florida document number 122000206503.

This amendment is submitted to amend the following:

**A. 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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4090 Shoal Line Blvd  
Hernando Beach FL 34607

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:

Maryann Dos Santos

New Registered Office Address:

4090 Shoal Line Blvd

Enter Florida street address

Hernando Beach

City

Florida

34607

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.*

Maryann Dos Santos

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>
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MGR	Jakob Johnson	4163 Diaz Ct	<input type="checkbox"/> Add
		Hernandez Beach Fl 34607	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

MGR	Maryann DosSantos	343 Silas Ct	<input checked="" type="checkbox"/> Add
		Spring Hill Fl 34609	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

			<input type="checkbox"/> Add
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[illegible]

(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

101181

Signature of a member or authorized representative of a member

HERB JOHNSON

Typed or printed name of signee