

L22000211434

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SECRETARY OF STATE
TALLAHASSEE, FL
2022 NOV 30 AM 9:33

11/30/22

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WATERWAYS MARINA INVESTMENTS EB, 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:

EDGAR A. BENES, ESQ.

Name of Person

EDGAR A. BENES, P.A.

Firm/Company

2300 NW CORPORATE BLVD., SUITE 222

Address

BOCA RATON, FLORIDA 33431

City/State and Zip Code

EBENES@BENESLAW.COM

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

2022 NOV 30 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

EDGAR A. BENES, ESQ.

561

999-1993

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**

WATERWAYS MARINA INVESTMENTS EB, 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 05/04/2022

Florida document number L22000211434

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)

19790 WEST DIXIE HIGHWAY, PENTHOUSE 1

MIAMI, FLORIDA 33180

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

19790 WEST DIXIE HIGHWAY, PENTHOUSE 1

MIAMI, FLORIDA 33180

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

City, Florida

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

FILED
2022 MAY 30 PM 9:33
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA

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>
MGR	EDGAR A. BENES	2300 NW CORPORATE BLVD. SUITE 222	<input type="checkbox"/> Add
		BOCA RATON, FLOIRDA 33431	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MG	ROBERT MOSKOVITZ	19790 WEST DIXIE HIGHWAY, PENTHOUSE 1	<input checked="" type="checkbox"/> Add
		MIAMI, FLORIDA 33180	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

2022 OCT 3 PM 3:33
SOUTH FLORIDA
STATE

2022/07/30 PM 9:33
SECURITY CENTER

2022-10-07 30 PM 9:33
SENIOR CENTER
MAIL

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 NOVEMBER 29 2022

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00