# L22000244231

(Re	questor's Name)	-
(Ad	dress)	
(Ad	ldress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	)
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
Amen	d	



200391165282

08/08/22--01036--002 \*\*25.00

SECRETARY OF STATE

Office Use Only

J DENNIS

OCT 2 7 2022

### SHAHEEN, JACOBS & ROSS, P.C.

COUNSELORS AT LAW 1425 FORD BUILDING 615 GRISWOLD DETROIT, MICHIGAN 48226-3993

(313) 963-1301 TELECOPIER: (313) 963-1619

August 4, 2022

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

Re: Maximus Self Storage Bayshore LLC

Florida Document No. L22000244231

Dear Sir/Madam:

Enclosed for filing please find a Cover Letter and Articles of Amendment to Articles of Organization for Maximus Self Storage Bayshore LLC. Also enclosed is our check in the amount of \$25.00 for the filing fee. Please provide a letter of acknowledgment once the enclosed has been processed.

Please feel free to contact the undersigned with any questions or comments.

Very truly yours,

SHAHEEN, JACOBS & ROSS, P.C.

Eric J. Carmichael

EJC:mkr Enclosures

Tklr:8/10/22 - Ferlito\Maximus Bayshore\Florida ltr - Amendment to Articles

## COVER LETTER

	Registration S Division of Co			
SUBJEC	MAXIMU	S SELF STORAGE BAYSHO	DRE LLC	
JODGEC	••	Name of Lir	nited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please ren	urn all correspo	ondence concerning this matter	r to the following:	
		ANTHONY FERLITO		
			Name of Person	
			Firm/Company	
		37335 CASA BELLA		
		CLINTON TOWNSHIP,	Address MI 48038	
			City/State and Zip Code	
		tony@ferlitogroup.com	(as have all Sur Si	
For further	· information c	oncerning this matter, please c	to be used for future annual report no all:	tification)
ANTHON	Y FERLITO		586 929-5000 at ( )	
	Name o	f Person		me Telephone Number
Enclosed is	s a check for th	ne following amount:		
<b>≡</b> \$25.00	Filing Fee	S30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R	lailing Addres egistration S ivision of C	Section	Street Address: Registration Se	
P.	O. Box 632	7	Division of Co The Centre of	Tallahassee
1:	allahassee, F	L 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAXIMUS SELF STORAGE BA	YSHORE LLC		
(Name of the Limi	ted Liability Compa (A Florida Limited)	i <mark>ny as it now appears on our records</mark> Liability Company)	<u></u> )
The Articles of Organization for this Limited L	iability Company	were filed on 05/26/2022	and assigned
Florida document number L22000244231			
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company." the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applic	rable:		
Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	<u>ΒΟΧ)</u>		
			· · · · · · · · · · · · · · · · · · ·
3. If amending the registered agent and/or in a second and/or the new registered office address.		address on our records, <u>enter</u>	the name of the new register
Name of New Registered Agent:	FRA	NK J. FERCITO	
New Registered Office Address:	1900 Co	NK J. FERLITO  RONA DEL SIRE DR  Enter Florida street address	<u> </u>
		City MYERS, Flo	

#### 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 Rogistered 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
MGR	MICHAEL FERLITO	37335 CASA BELLA	□Add
		CLINTON TOWNSHIP, MI 48038	■Remove
			Change
MGR FRANK J. FERLITO	FRANK J. FERLITO	1900 Corona Del Sire	<b>≣</b> Add
		North Fort Myers, FL 33917	□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
<del></del>			□Add
			□Remove
			□Change
			DAdd
			□ Remove
			∏Change

	<del></del>
-	
-	
-	
-	
-	
_	
_	
_	
Note:	we date, if other than the date of filing:
ne 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
****	
	JUCY 28th 2022
	Jucy 28 21 2022
Dated _	Signardre of a member or authorized representative of a member

Filing Fee: \$25.00