

L22000267160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

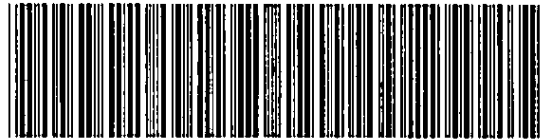
(Business Entity Name)

(Document Number)

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06/29/22 - 01009--03F *\$25.00

2022 06 29 11:10:58

9/29/2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Altima Caviar 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:

Robert Riva

Name of Person

c/o Castle Lantz Maricle, LLC

Firm/Company

4100 E. Mississippi Avenue, Suite 410

Address

Denver, CO 80246

City/State and Zip Code

abriody@clmatty.com

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

For further information concerning this matter, please call:

Arlene Briody

720 613-1362
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



Lawrence E. Castle
lcastle@clmatty.com
Arlene M. Briody -Direct Dial:
720.613.1362
abriody@clmatty.com

June 28, 2022

VIA FEDERAL EXPRESS

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

To Whom it May Concern:

Please find, attached to this letter, the Amendment to the Articles of Altima Caviar LLC, filing number L22000267160, changing the Members to Managers, and a \$25.00 check for the filing fee.

Best regards,

A handwritten signature in black ink, appearing to be "AB", written over a horizontal line.

Arlene M Briody
Legal Assistant to Lawrence E. Castle, Esq.

Enclosures:

Amendment
Filing Fee \$25.00

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Altima Caviar LLC

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

2022 JUN 29 11:10:58

The Articles of Organization for this Limited Liability Company were filed on June 10, 2022 and assigned
Florida document number L22000267160.

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 "LLC."

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Maribel Alvarez	410 Everina Street #801	<input type="checkbox"/> Add
		West Palm Beach, FL 33401-544UN	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Robert Riva	410 Everina Street #801	<input type="checkbox"/> Add
		West Palm Beach, FL 33401-544UN	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Capsco LLC	c/o Castle Lantz Maricle, LLC	<input type="checkbox"/> Add
		4100 E. Mississippi Avenue, Suite 410	<input type="checkbox"/> Remove
		Denver, CO 80246	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[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)

If the 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 record is filed.

Arlene M Briody, Authorized Signatory

Typed or printed name of signee

Filing Fee: \$25.00