

L22000307596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

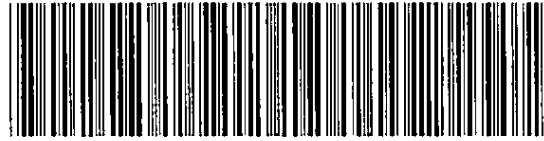
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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FILED

2022 NOV 21 AM 8:59

REGISTRATION SERVICE

2022 NOV 21 AM 8:24

A. BUTLER

NOV 24 2022

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-624

Please use funds from this account: 120210000160 Amount: \$ 25.00

Authorization Signature: *Jan Telle*  
Mickey's Backyard Playground, LLC L22000307596  
Business Document #

☐ Walk in  
☐ Pick up time ☐

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certified Copy of Articles of Organization

☐ Certificate of Status

**NEW FILINGS**

☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ LLLP  
☐ **CORP**

**AMMENDMENTS**

☒ Amendment  
☐ Resignation of R.A. Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/  
☐ Merger  
☐ **Conversion**  
☐ **AFFIDAVID BY FOREIGN CORP.**

**OTHER FILINGS**

☐ Annual Report  
☐ Fictitious Name

APOSTIL  
Country

**REGISTRATION/QUALIFICATIONS**

☐ Foreign filing  
☐ Statement of Partnership  
☐ Reinstatement  
☐ Other

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: MICKEY'S BACKYARD PLAYGROUND 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:

Sandra Z. Green, Esq.

\_\_\_\_\_  
Name of Person

JONATHAN GREEN & ASSOCIATES, P.A.

\_\_\_\_\_  
Firm/Company

901 Ponce de Leon Suite 601

\_\_\_\_\_  
Address

Coral Gables, Florida 33134

\_\_\_\_\_  
City/State and Zip Code

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

For further information concerning this matter, please call:

Sandra Z. Green, Esq.

305 372-5100

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**

**FILED**

2022 NOV 21 AM 8:59

MICKEY'S Backyard-Playground, LLC

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

CLERK OF STATE  
DALE W. HARRIS, JR.  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 07/11/22 and assigned  
Florida document number L22000307596.

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) \_\_\_\_\_

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	LOPEZ, MICHELLE C.	3500 SW 147TH AVENUE	<input type="checkbox"/> Add
		MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Linguini Holdings Family LLLP	3500 SW 147 AVENUE	<input checked="" type="checkbox"/> Add
		MIRAMAR, FL 33027	<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
			<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.

\_\_\_\_\_ 2022 \_\_\_\_\_

SANDRA Z. GREEN, ESQ.

**Filing Fee: \$25.00**