

122000480164

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

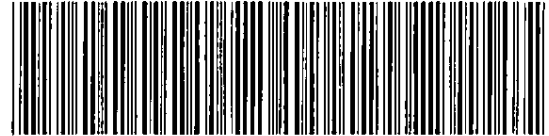
(Business Entity Name)

(Document Number)

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FILED  
2023 JUN -5 AM 7:43  
STATE OF FL

cf 7/26/2023

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Bottom of the Bin 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:

Stavroula S. Christou

Name of Person

Bottom of the Bin LLC

Firm/Company

12840 Seminole Blvd Lot 43

Address

Large, FL 33778

City/State and Zip Code

Bottom of the Bin Crafts@gmail.com

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

For further information concerning this matter, please call:

Stavroula S Christou

Name of Person

at (727)

Area Code

656-2606

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**

Bottom of the Bin LLC

2023 JUN -5 AM 7:43

(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 11/9/2022 and assigned Florida document number L22000480164.

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)**

9444 Seminole Blvd

Seminole, FL 33772

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

12840 Seminole Blvd

Lot 43

Largo, FL 33778

**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:

Stavroula S. Christou

New Registered Office Address:

12840 Seminole Blvd, Lot 43

Enter Florida street address

Largo

City

Florida

33778

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.*

Stavroula S. Christou, AMBR

**If Changing Registered Agent, Signature of New Registered Agent**

If attending 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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AMBR	Stephanie M. Dominguez	1516 Rincon Drive	<input type="checkbox"/> Add
		Wesley Chapel, FL	<input type="checkbox"/> Remove
		33544	<input type="checkbox"/> Change

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_____	_____	_____	<input type="checkbox"/> Remove
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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)

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.

Schroston, AMBR  
Signature of a member or authorized representative of a member

Starroula S. Christou  
Typed or printed name of signee

**Filing Fee: \$25.00**