

122000486168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

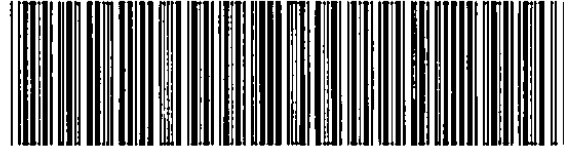
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TO: Registration Section
Division of Corporations

SUBJECT: 627 Cherry Neptune 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:

Jennifer P. Marsoni

Name of Person

Firm/Company

100 Cypress Pond Ct

Address

Ponte Vedra Beach, FL 32082

City/State and Zip Code

jennmarsoni@gmail.com

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

For further information concerning this matter, please call:

Jennife Marsoni

Name of Person

904

439.1022

at ()

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

**TO
ARTICLES OF ORGANIZATION
OF**

627 Cherry Neptune 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 November 14, 2022 and assigned
Florida document number L22000486168

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."

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 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of A</u>
MGR	Jennifer F. Marsoni		<input type="checkbox"/> Add
		100 Cypress Pond Ct., Ponte Vedra Beach, FL 32082	<input checked="" type="checkbox"/> Remo
			<input type="checkbox"/> Chang
MGR	Adrien F. Marsoni	100 Cypress Pond Ct., Ponte Vedra Beach, FL 32082	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remo
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.

Dated November, 30, 2022

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L22000486168
FILED 8:00 AM
November 14, 20
Sec. Of State
kcostello

Article I

The name of the Limited Liability Company is:

627 CHERRY NEPTUNE LLC

Article II

The street address of the principal office of the Limited Liability Company is:

100 CYPRESS POND CT
PONTE VEDRA BEACH, FL. 32082

The mailing address of the Limited Liability Company is:

100 CYPRESS POND CT
PONTE VEDRA BEACH, FL. 32082

Article III

The name and Florida street address of the registered agent is:

MARSONI JENNIFER
100 CYPRESS POND CT
PONTE VEDRA BEACH, FL. 32082

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: JENNIFER MARSONI