

L22000524018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

amend

Office Use Only



400440152914

11/25/24--01020--003 **25.00

2024 NOV 25 PM 3:48
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Azzurro Cucina MDPA 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:

Arthur R. Rosenberg

Name of Person

Arthur R. Rosenberg, PA

Firm/Company

6499 North Powerline Road, Suite 304

Address

Fort Lauderdale, Florida 33309

City/State and Zip Code

arr@arrosenberg.com

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

For further information concerning this matter, please call:

Arthur R. Rosenberg, PA

954

856-5151

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

2024 NOV 25 PM 3:48
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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

Azzurro Cucina MDPA 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 _____ and assigned Florida document number 22000524018.

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)

200 Hypoluxo Road

Suite 108

Lantana, FL 33462

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

200 Hypoluxo Road

Suite 108

Lantana, FL 33462

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:

Joel P. Koepfel, Esq

New Registered Office Address:

Koepfel Law Group, P.A. 1515 N. Flagler Dr. Ste 220

Enter Florida street address

West Palm Beach


Florida 33401

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>
AMBR	MICHAEL DUBROVSKY	16001 Collins Avenue, Unit 4202	<input type="checkbox"/> Add
		Sunny Isless Beach, Florida 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	P & I Accarpio Management Inc.	1901 Collins Avenue, Unit 2904	<input type="checkbox"/> Add
		Sunny Isless Beach, Florida 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	CHRISTOPHER ZITO	500 North Congress Avenue	<input type="checkbox"/> Add
		Delray Beach, Florida 33445	<input checked="" 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

2024 NOV 25 PM 3:48
 FILED
 STATE
 SECRETARY OF
 TALLAHASSEE, FL

SECRETARY OF THE
TALLAHASSEE.

SECRETARY OF STATE
TALLAHASSEE, FL

2024 NOV 25 PM 3:48

77

(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.

Dated November 26th 2024

Signature of a member or authorized representative of a member

CHRISTOPHER ZITO

Typed or printed name of signee

Filing Fee: \$25.00