## L23000182414

(Requestor's Name)	
(Address)	
,	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Dusinger Fatity Name)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer.	
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION . OF

Dancing In The Sand, 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 April 12, 2023 \_\_\_\_ and assigned Florida document number 1.23000182414 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

## 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.

## **COVER LETTER**

TO:

**Registration Section** 

Division of Cor	porations		
Dancing In	The Sand, LLC		
SUBJECT:	Name of Lin	nited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Ralph Belfiglio Jr		
		Name of Person	
	Dancing In The Sand		
		Firm/Company	~:
	4550 Cove Circle		
	<del></del>	Address	
	St Petersburg , FL 33708		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	RalphBelfiglioJr@AOL.com	m to be used for future annual report no	wifestion)
For further information c	oncerning this matter, please c		
Ralph Belfiglio Jr		201 983-2824 at ()	
Nа <b>т</b> е о	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address: Registration S	ection
Registration Section Division of Corporations		Division of Co	
P.O. Box 6327		The Centre of	Tallahassee
Tallahassee, I	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

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>	Address	Type of Action
AMBR	Ralph Belfiglio Jr	4550 Cove Circle # 102	
		St Petersburg , FL 33708	□Remove
			<b>≡</b> Change
			□Change
		<del></del>	 □Add
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1 am changi	ing my	Title to	AMB	$\mathcal{R}_{-}$
(Authorized	Momber	_ )	•	
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				<del>-</del> -
				<u>.</u>
		-		
ve date, if other than the date	of filing:		(optional)	
ective date is listed, the date must be sp If the date inserted in this block do	oes not meet the applicable:	te of filing or more that statutory filing requ	n 90 days after filing ) P	ursuant to 60 Il not be lis
ective date is listed, the date must be sp If the date inserted in this block do ent's effective date on the Departn I specifies a delayed effective date.	oes not meet the applicable : nent of State's records.	statutory filing requ	n 90 days after filing.) Prirements, this date wi	ll not be lis
ective date is listed, the date must be sp If the date inserted in this block do ent's effective date on the Departn d specifies a delayed effective date ed.	oes not meet the applicable : nent of State's records.	statutory filing requ	n 90 days after filing.) Prirements, this date wi	ll not be lis
ective date is listed, the date must be sp If the date inserted in this block do ent's effective date on the Departn d specifies a delayed effective date ed.  June 16	oes not meet the applicable : nent of State's records.  c, but not an effective time, a	statutory filing requ	n 90 days after filing.) Prirements, this date wi	ll not be lis

Filing Fee: \$25.00