

L23 000 249 910

(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:

Office Use Only

56



400413412524

06/17 23--01006--010 4424.00

RECEIVED
2023 AUG 17 PM 2:53
SECURITY DIVISION
TALLAHASSEE, FLORIDA

2023 AUG 17 PM 2:53

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Softshell Homes 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:

Eric Suesz

Name of Person

Firm/Company

12811 Kenwood Ln # 113

Address

City/State and Zip Code

Ft Myers, FL 33907

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

RECEIVED
JUL 17 11 08 AM
2015

For further information concerning this matter, please call:

Eric Suesz

863

241-3073

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**

Softshell Homes 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 05/22/2023 and assigned
Florida document number L23000249910.

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:

Eric Suesz

New Registered Office Address:

12811 Kenwood Ln

Enter Florida street address

Ft Myers

City

, Florida 33907

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	Jennifer Martin	12811 Kenwood Ln # 113	<input type="checkbox"/> Add
		Ft Myers, FL 33907	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Eric Suesz	12811 Kenwood Ln # 113	<input type="checkbox"/> Add
		Ft Myers , FL 33907	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Rod Shoffstall	12811 Kenwood Ln # 113	<input checked="" type="checkbox"/> Add
		Ft Myers, FL 33907	<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

1963 11 17 PM 10:10

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 08/15/2023 , _____

[Signature]

Signature of a member or authorized representative of a member

Eric Suerz

Typed or printed name of signee

Filing Fee: \$25.00