L23000431174

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(Document Number)
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10/24/23--01027--011 ++25.00



COVER LETTER

TO:	Registration Section
	 Division of Corporations

10981 Harmony Drive - 3 & 4 LLC

SUBJECT: ____

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:

Steve Karterouliotis

Name of Person

Steve Karterouliotis

Firm/Company

3430 7th Ave NW

Address

Naples, FL 34120-1206

City/State and Zip Code

karter@supremeflooring.net

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

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

🔳 \$25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status

S55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> 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

10981 Harmony Park Dr LLC	
(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on $\frac{09/15/2023}{2000431174}$ and assigned	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
10981 Harmony Park Dr 3 & 4 LLC	_
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)	
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, <u>enter the name of the new registered office address here</u> :	<u>ered</u>
Name of New Registered Agent:	-
New Registered Office Address:	`
Enter Florida street address	
, Florida	_
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. Thereby 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>	Address	Type of Action
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			DChange
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D.	If amending any other information.	enter change(s) here:	(Attach additional she	ets, if necessary.)
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recuve date is fisted, the o	and must be specific	z ana cannot be prio	r to date of ming of m	iore man <i>so</i> days after	date will not be list

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.

October 16 Dated	2023	
Al-	A-h-	
Falle	1)	
	Signature of a member or authorized representative of a member	
Steve Karterouliotis	N N	

I yped or printed name of signee