

L 23000434069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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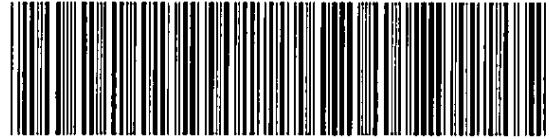
(Business Entity Name)

(Document Number)

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VIA



GOLDMAN, MONAGHAN,
THAKKAR & BETTIN, P.A.

Attorneys at Law

VIA US MAIL

October 30, 2023

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Articles of Amendments

Dear Sir/Madam:

Enclosed please find the completed and signed Articles of Amendments for the following companies:

1. 95 HALL ROAD, LLC, *a Florida Limited Liability Company*;
2. 7980 ATLANTIC AVENUE, LLC, *a Florida Limited Liability Company*; and
3. 8711 BAY COURT, LLC, *a Florida Limited Liability Company*.

I have also enclosed a firm check no. 17788 in the amount of Seventy-Five Dollars (\$75.00) for the filing fees associated with the processing of the forms. Once the forms are filed, please forward the issued letter of acknowledgement to our office. Should you have any questions or concerns, please do not hesitate to contact me directly.

Regards,

/s/ Matthew J. Monaghan

Matthew J. Monaghan

Enclosures

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

95 HALL ROAD, 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 09/18/2023 and assigned
Florida document number L23000434069.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A

(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: N/A

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, 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	Samuel W. Heard, Trustee	861 N. Indian River Road	<input checked="" type="checkbox"/> Add
		Cocoa, FL 32922	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Astrid W. Heard, Trustee	861 N. Indian River Road	<input checked="" type="checkbox"/> Add
		Cocoa, FL 32922	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Samuel W. Heard	861 N. Indian River Road	<input type="checkbox"/> Add
		Cocoa, FL 32922	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Astrid W. Heard	861 N. Indian River Road	<input type="checkbox"/> Add
		Cocoa, FL 32922	<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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

E. Effective date, if other than the date of filing: _____ (optional)

(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)

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.

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 Oct 30, 2023, 2023

Matthew J. Monaghan
Matthew J. Monaghan 10.1.10.10 511 1.1.101

Signature of a member or authorized representative of a member

Matthew J. Monaghan, Esq.

Typed or printed name of signee

Filing Fee: \$25.00