La3000465915

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates of	Status
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Special Instructions to Filin	ig Officer;	
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	AM	end

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OIVER ALLAHASSEE FLOOR 6

CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 11/02/23 Order #: 1305738-1

Re: 17553 SE Conch Bar Holdings LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account; \$25.00 - FL State Account Number: 12000000195 Authorization:

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section

Division of Corporations

Tallahassee, FL 32314

		.c				
SUBJECT:	Name of Lin	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Maria Guarducci, Paralega	al				
	Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. see return all correspondence concerning this matter to the following: Maria Guarducci, Paralegal Name of Person Stern Kilcullen & Rufolo, LLC Firm/Company 325 Columbia Tpke, Ste 110 Address Florham Park, NJ 07932 City/State and Zip Code mguarducci@sgklaw.com E-mail address: (to be used for future annual report notification) further information concerning this matter, please call:					
	Name of Limited Liability Company of Amendment and fee(s) are submitted for filing. spondence concerning this matter to the following: Maria Guarducci, Paralegal Name of Person Stern Kilcullen & Rufolo, LLC Firm/Company 325 Columbia Tpke, Ste 110 Address Florham Park, NJ 07932 City/State and Zip Code mguarducci@sgklaw.com E-mail address: (to be used for future annual report notification) at concerning this matter, please call: at 973 Area Code Daytime Telephone Number or the following amount: S30.00 Filing Fee & Certificate of Status & Certificat Copy (additional copy is enclosed) Certificate of Status & Certificat Copy (additional copy is enclosed)					
		Firm/Company				
	325 Columbia Tpke, Ste 1	Name of Limited Liability Company Int and fee(s) are submitted for filing. Interning this matter to the following: Guarducci, Paralegal Name of Person Gilcullen & Rufolo, LLC Firm/Company Journbia Tpke, Ste 110 Address Internity Park, NJ 07932 City/State and Zip Code Jourci@sgklaw.com E-mail address: (to be used for future annual report notification) Internity Park, NJ 07932 Area Code Joaytime Telephone Number g amount: Job Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations				
		Address				
	Name of Limited Liability Company of Amendment and fee(s) are submitted for filing. spondence concerning this matter to the following: Maria Guarducci, Paralegal Name of Person Stem Kilcullen & Rufolo, LLC Firm/Company 325 Columbia Tpke, Ste 310 Address Florham Park, NJ 07932 City/State and Zip Code mguarducci@sgklaw.com E-mail address: (to be used for future annual report notification) n concerning this matter, please call: at (
		City/State and Zip Code				
	E-mail address: (to be used for future annual report no	itilication)			
For further information of	concerning this matter, please c	all:				
Maria Guarducci						
Name o	of Person	Area Code Dayti	me Telephone Number			
Enclosed is a check for the	he following amount:					
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy			
Mailing Address			ection			
•						
P.O. Box 632		The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SE CONCH BAR HOLDINGS LLC	<u> </u>
(Name of the Limited I (A I	liability Company as it now appears on our records. Iorida Limited Liability Company)	<u> </u>
The Articles of Organization for this Limited Liabil Florida document number L23000465915	lity Company were filed on October 10, 2023	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC"	or the abbivitation "M.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	ASS PARTY OF THE PROPERTY OF T
Enter new mailing address, if applicable:		3: 49 STATE E. FL
(Mailing address MAY BE A POST OFFICE BO.	<u></u>	
B. If amending the registered agent and/or regis	stered office address on our records, <u>enter</u> : ere:	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flo	orida
-	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>	Address	Type of Action
MGR	Lisa Piltch	505 NW Windflower Terrace	= Add
		Jensen Beach, FL 34957	□Remove
			□Change
AMBR	R Lisa Piltch	505 NW Windflower Terrace	≣Add
		Jensen Beach, FL 34957	Remove
			Remove SECRETARIO
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			Remove
			Change
			□Remove
			Change
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Effective date, if ot (If an effective date is list Note: If the date inst document's effective	erted in this block	does not me	et the applic	able statutory	or more than 9 filing require	option: 0 days after fil ments, this d	al) ing.) Pursuant ate will not l	to 605,0207 be listed as
he record specifies a do ord is filed.	elayed effective da	ate, but not a	n effective ti	me, at 12:01 :	a.m. on the ea	rlier of: (b)	The 90th da	y after the
Dated November 1		, ,	2023					
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Filing Fee: \$25.00