La3000543301

<u> </u>	(Requestor's Name)
	(Address)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
_	_
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Bosiness Likey Northe)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE
	DE0.0.4
	DEC 2 1 ;

Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

WATERSONG 2	37 LLC	
Dlanes Dakit PCA	000000003 For: 25	
Please Deon FCA	000000003 FOF: =3	
Thank you Seth N	leeley	
Stal	•	Art of Inc. File
		UTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Capy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
1.		Officer Search
4	2/	Fictitious Search
Signature	<u>/</u>	Fictitious Owner Search
		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
Name	Date Time	UCC 11 Search
		UCC II Retrieval
Walk-In	Will Pick Up	Courier

COVER LETTER

	Registration Se Division of Cor			
CUD IEZ		ONG 237 LLC		
SUBJEC	T:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Błanca L Kasinsky		
			Name of Person	
			Firm/Company	
		1420 Celebration Blvd ST	E 104	
			Address	
		Celebration, FL 34747		
			City/State and Zip Code	
		wilma@larosainternacional		
		E-mail address: (to be used for future annual report notif	ication)
For furth	er information co	oncerning this matter, please ca	all:	
Mayra C			914 6027808 at () Area Code Daytine	
	Name of	f Person	Area Code Daytime	: Telephone Number
Enclosed	is a check for th	e following amount:		
3 \$25.0	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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

WATERSONG 237 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 $\frac{12/07/2023}{12/07/2023}$ and assigned 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 "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, 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

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	Blanca L Kasinsky	1420 Celebration Blvd STE 104	
		CELEBRATION, FL 34747	□ Remove
			☐ Change
			Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
			Remove
			□ Change
			Add
			□ Remove
			□ Change
			Add
		•	□ Remove

If the record specifies a delayed (b) The 90th day after the reco		fective time, at 12:01 a.m. on the earlier of:
document's effective date on the Dep	partment of State's records.	
Note: If the date inserted in this bloom	ck does not meet the applicable stati	(optional) filling or more than 90 days after filling.) Pursuant to 605.0207 (3)(1 utory filling requirements, this date will not be listed as the
		_

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

COVER LETTER

TO: Registration S Division of Co			
CL'IN KIN CIT	ONG 237 LLC		
SOBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Blanca L Kasinsky		
		Name of Person	<u>.</u>
		Pirm/Company	
	1420 Celebration Blvd ST	E 104	
		Address	
	Celebration, FL 34747		
	 -	City/State and Zip Code	
	wilma@larosainternacional		
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report notifi all:	cation)
Mayra Guevara		914 6027808 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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WATERSONG 237 LLC		5
(Name of the Limited Lia (A Flo	hility Company as it now appears on our records.) rida Limited Liability Company)	·····
The Articles of Organization for this Limited Liability Florida document number 1.23000543301	y Company were filed on 12/07/2023	and assigned
his amendment is submitted to amend the following	;	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "L1.C" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		•
3. If amending the registered agent and/or registered agent and/or the new registered office a	• •	nter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		a
	City	aZip 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	Blanca L Kasinsky	1420 Celebration Blvd STE 104	Add
		CELEBRATION, FL 34747	□ Remove
			Change
			Remove
		••••	Change
			D Add
			Remove
			□ Change
			Add
		- 	Remove
			Change
			Remove
			Change
			D Add
			Remove
			□ Change

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fective date, if other than the o	late of filing:	(optional) f filling or more than 90 days after filling.) Pursuant to 605.020
on effective date is fisted, the date must obe: If the date inserted in this blo ocument's effective date on the De	ck does not meet the applicable stati	utory filing requirements, this date will not be listed a
record specifies a delayed The 90th day after the reco		fective time, at 12:01 a.m. on the earlier (
December 19	2023	
	Blance Ken	insky presentage of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00