

L24000094132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

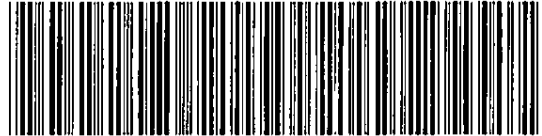
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2024 NOV 19 AM 10:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

2024 NOV 19 AM 11:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-54372  
(850) 524-6243

Please use funds from the account I20210000160:     \$ 25.00    

Authorization Signature: 

**Fitzgerald Saperstein Auctioneers & Appraisers LLC.**

Business Name #Document

     Walk in      Will wait

     Certified Copies of the Articles of Incorporation

     Certificate of Status

**NEW FILINGS**

     Profit  
     Not for Profit  
     LLC  
     Domestication  
     INC  
     CORP  
     OTHER

**AMENDMENTS**

  X   Amendment  
     Resignation of R.A.  
     Change of Registered Agent  
     Dissolution/Withdrawal  
     Conversion  
     Statement of FACT  
     Merger

**OTHER FILINGS**

     Annual Report  
     Fictitious Name  
     Statement of Authority  
     APOSTIL                       
                    COUNTRY

**REGISTRATION/QUALIFICATIONS**

     Foreign Filing  
     Partnership  
     Reinstatement  
     CORRECTION for a Foreign LLC  
     Domestication of a Foreign Corp.  
     Other

EXAMINER'S INITIALS:

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Fitzgerald Saperstein Auctioneers & Appraisers 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:

William Fitzgerald

\_\_\_\_\_  
Name of Person

Fitzgerald Saperstein Auctioneers & Appraisers

\_\_\_\_\_  
Firm/Company

2689 oak tree drive

\_\_\_\_\_  
Address

Fort Lauderdale FL 33309

\_\_\_\_\_  
City/State and Zip Code

tdeanthy10@gmail.com

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

For further information concerning this matter, please call:

Tyler Deanthony

508  
at (\_\_\_\_\_) \_\_\_\_\_

6489245

\_\_\_\_\_  
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**

Fitzgerald Saperstein Auctioneers & Appraisers LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2024 NOV 19 AM 10:01

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA  
and assigned

The Articles of Organization for this Limited Liability Company were filed on February 22, 2024  
Florida document number L24000094132

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:

William Fitzgerald

New Registered Office Address:

2689 Oak Tree Drive

Enter Florida street address

Fort Lauderdale

City

Florida 33309

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	William Fitzgerald	2689 oak tree drive fort lauderdale fl 33309	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Sean Fitzgerald	2689 oak tree drive fort lauderdale fl 33309	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Tyler DeAnthony	2689 oak tree drive fort lauderdale fl 33309	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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FILED  
2024 NOV 19 AM 10:01  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

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2024 NOV 19 AM 10:01  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

**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 November 19, 2024

William Fitzgerald

Typed or printed name of signee