

L24000 171 463

SW

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300428170533

FILED

FILED

2024 APR 29 PM 2:25

DEPT. OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELSEANA 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:

Elseana M Panzer

Name of Person

ELSEANA LLC

Firm/Company

140 Calle El Jardín Unit 204

Address

St Augustine, FL 32095

City/State and Zip Code

ELSEANA.LLC@gmail.com

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

For further information concerning this matter, please call:

Elseana Panzer

715

851-5906

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L24000171463
FILED 8:00 AM
April 10, 2024
Sec. Of State
wlawrence

Article I

The name of the Limited Liability Company is:

ELSEANA, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

382 NE 191ST ST #812975
MIAMI, FL. US 33179

The mailing address of the Limited Liability Company is:

382 NE 191ST ST #812975
MIAMI, FL. US 33179

Article III

The name and Florida street address of the registered agent is:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL. 32202

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: CHEYENNE MOSELEY, US CORP. AGENTS

Changes are highlighted

Article IV

The name and address of person(s) authorized to manage LLC:

Title: AMBR
ELSEANA M PANZER
382 NE 191ST ST #812975
MIAMI, FL. 33179 US

L24000171463
FILED 8:00 AM
April 10, 2024
Sec. Of State
wlawrence

Signature of member or an authorized representative

Electronic Signature: ELSEANA MAEVE PANZER

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

Please change legal zooms RA information

I did not realize they were putting themselves
on my LLC They charged me over \$1000.00
and will not let me cancel.

Thank you

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

ELSEANA 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 April 10th 2024 and assigned
Florida document number L24000171463.

This amendment is submitted to amend the following:

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

ELSEANA, LLC

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)

140 Calle El Jardin Unit 204

St Augustine, FL 32095

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

140 Calle EL Jardin Unit 204

St Augustine, FL 32095

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:

Bridget M Panzer

New Registered Office Address:

140 Calle El Jardin Unit 204

Enter Florida street address

St Augustine

Florida 32095

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.

Bridget M Panzer
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>
RA	CHEYENNE MOSELEY	UNITED STATES CORPORATION AGENTS, INC	<input type="checkbox"/> Add
		476 RIVERSIDE AVE JACKSONVILLE, FL 32202	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
PO	US CORP AGENTS	382 NE 191ST ST #812975 MIAMI FL 33179	<input type="checkbox"/> Add
			<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
			<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.)*

I HEREBY RELINQUISH LEGALZOOM AS REGISTERED AGENTS FROM MY SOLE PROPRIETORSHIP

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 04/17/24, 2024

Elsana m. Pamer

Signature of a member or authorized representative of a member

Elsana M Panzer

Typed or printed name of signee

Filing Fee: \$25.00