L24000279645

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Prione #)
PICK-UP WAIT MAIL
(Business Entity Name)
(
(Document Number)
Certified Copies Certificates of Status
[
Special Instructions to Filing Officer:
,

Office Use Only



000437774810

10/17/24--01002--001 **25.00

FILED
2024 OCT 17 PM 12: 09

COVER LETTER

TO:

Registration Section

Divi	sion of Corp	orations					
SUBJECT:	Beachsid	de Bliss Realty, LLC (Jacqueline Leigh Crimr	nins LLC.)			
SUBJECT:		·	ited Liability Company				
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspor	ndence concerning this matter	to the following:				
			Kaitlyn DeRosia				
			Name of Person	- 			
Controllers, Ltd							
Firm/Company							
		1005	Terminal Way, Suite 1	00			
Address							
			City/State and Zip Code				
	kaitlyn@controllersltd.com						
			to be used for future annual report no	otification)			
For further in	iformation co	ncerning this matter, please co					
Kaitlyn DeRosia		losia	384-8124 at (775				
Name of Person		Person		ime Telephone Number			
Enclosed is a	check for the	e following amount:					
X \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Reg	ling Address gistration S vision of Co		Street Address: Registration S Division of C				
P.O	Box 6327	7	The Centre of	Tallahassee			
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F/LED 2024 OCT 17 PM 12: 09

BEACHSIDE BLISS REALTY, LLC		TALLAHASSEE, FLORIDA
(Name of the Limited List (A Flor	ollity Company as it now appears on our rec rida Limited Liability Company)	orde.) FLORIDA
The Articles of Organization for this Limited Liability Florida document number 124000279645	Company were filed on JU N2002	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
Jacqueline Leigh Crimmins LLC.		
The new name must be distinguishable and contain the words "L	amited Liability Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here		ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ada	tress
		Florida
	City	Zφ 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
			□Add
			Remove
			□Change
			□ Remove
			
			□Add
			☐ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Add
			□Remove
			□Change

						
						
					•	
		<u></u>				
					<u> </u>	
	-, <u>-</u> -,			<u>.</u>	· · ·	
	······································					~~
					<u> </u>	<u> </u>
					프	2024 OC
					ASS	
					-	PM 12: 09
						ू है
						25.08 80 :23
						>
ctive date, if other than the effective date is listed, the date must e: If the date inserted in this blo iment's effective date on the De	be specific and cann ck does not meet t	he applicable		nore than 90 days		
ord specifies a delayed effective filed.	date, but not an e	ffective time.	, at 12:01 a.m.	on the earlier o	f: (b) The 90	th day aft er
d OCTOBER 02	, 20	24	,			
			ed representativ			

Filing Fee: \$25.00