## L24000355353

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2024 SEP 25 AH 1: 50 SALLAHASSEE STATE



## **COVER LETTER**

TO: Registration Se Division of Con			
	Whitney LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The sales of Assistance	· · · · · · · · · · · · · · · · · · ·	onimal Car Clina	
	Amendment and fee(s) are sub	-	
Please return all correspo	ondence concerning this matter	to the following:	
	James Milliron		
		Name of Person	
	Wahoo Whitney LLC	2	
		Firm/Company	<del></del>
	1090 NW North River	r Drive. APT 302	
		Address	
	Miami, FL 33136		
	stommasino@nbatlanti	City/State and Zip Code ic.com	
	E-mail address:	to be used for future annual report not	ilication)
For further information of	concerning this matter, please o	all:	
Scott Tommasino		305 469-1363	3
Name o	of Person	Area Code Daytim	ne Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addres</u> Registration		<u>Street Address:</u> Registration Se	ection
Registration Section Division of Corporations		Division of Corporations	
P.O. Box 632		The Centre of T	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wahoo Whitney LLC (Name of the Limited Liability Company as it now appears on our records. 2024 SEP 25 Ari 1:50 The Articles of Organization for this Limited Liability Company were filed on\_\_\_\_\_ Florida document number L24000355353 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: 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.

City

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
AMBR	Whitney Landin	1090 NW N River Dr., APT 302 Miami, FL	□Add
			Remove
			□Change
	<u> </u>		🗆 Add
			□Remove
			□ Change
			□Add
		· · ·	□Remove
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			□Add
			□Remove
		<del></del>	□Change
			□ Add
			□Remove
			□Change

	From: 1000 Brickell Ave., Suite 590 Miami, FL 33131
	To: 1090 NW North River Drive, Apt. 302 Miami, FL 33136
_	
	Amend Electronic Articles of Organization for Florida LLC
	Remove: Article III Other Provisions if any: Watercraft Charter
_	
_	
_	
_	<del></del>
_	
an effec <u>Vote:</u> If	e date, if other than the date of filing:
record I is filed	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 d.
ated _	September 24 2024
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00