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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (512)597-0678

Enter the email address for this business entity to be used for uture annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PAZZO ON ORANGE LLC

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Pazzo on Orange LLC	I I I I I I I I I I I I I I I I I I I	· · · · · · · · · · · · · · · · · · ·
(Same of the Emile)	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia	bility Company were filed on 08/27/2024	and assigned
Florida document number 1.24000376211		
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "ELC" or the	ic abbreviation "E.E.C."
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	(ADDRESS)	<u> </u>
		j og
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
		<u></u>
		-0 .4
B. If amending the registered agent and/or res	gistered office address on our records, <u>enter the r</u>	name of the new registered
agent and/or the new registered office address	here:	
		54 G
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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.

11 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member

or removed from our records:

<u>Title</u>	Name	Address	Type of Action
AMBR	Frank Nocco	481 North Orange Avenue	≡ Add
		Sarasotu, FL 34236-5003	□ Remove
MGR	Frank Nocao	48) North Orange Avenue	□Add
		Sarasota, FL 34236-5003	[]Remove
			≡ Change
AMBR	Andrew J Calore	2472 Hyde Park St	= Add
		Sarasota, FL 34239	□Remove
			LlChange
MGR	Andrew J Calore	2472 Hyde Park St	= 4dd
		Sarasota, Ft. 34239	□Remove
			□Change
AMBR	michael teinet	481 North Orange Avenue	= Add
		Sarasota, F1, 34236-5003	i IRemove
			[](Change
			□Add
			□ Remove
			LiChange

f amending any other information	on, enter change(s) here: /.	Ittach additional sheets, if nece	ssary.)

			• •
			
Iffective date, if other than the d	ate of filing:	(optio	nal)
Effective date, if other than the defeat entire date is listed, the date must be Note: If the date inserted in this bloe document's effective date on the Dep	k does not meet the applicable	te of filing or more than 90 days after statutory. Filing requirements, this	iting.) Pursuant to 605,0207 (date will not be listed as t
record specifies a delayed effective of is filed.	late, but not an effective time,	at 12:01 a.m. on the earlier of: (b)	The 90th day after the
November 19th Dated	2024		
/s/ Frank Nocco			
	gnature of a member or authorized	f representative of a member	

Filing Fee: \$25.00

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Page: 4 of 4

To:

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From: ZenBusiness User

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