

L24000434166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

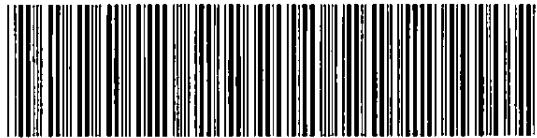
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000437779370

2004 OCT 17 PM 2:18
SECRET
FBI



COLEMAN YOVANOVICH KOESTER

4001 Tamiami Trail North, Suite 300
Naples, Florida 34103
T: 239.435.3535 | F: 239.435.1218

Writer's Email:
bbertaccini@cyklawfirm.com

October 16, 2024

VIA FEDEX

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

RE: Amendment to Articles of Organization – 3353Binnacle Dr., LLC

To Whom It May Concern:

Enclosed please find an Amendment to Articles of Organization form along with our firm's trust account check in the amount of \$25.00 for your fee. Please process at your earliest convenience and should you have any questions, please contact me at the number shown above.

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read 'B Bertaccini'.

Barbara Bertaccini
Paralegal

Enclosure

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3353BINNACLE DR 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:

BARBARA BERTACCINI

Name of Person

COLEMAN, YOVANOVICH & KOESTER, P.A.

Firm/Company

4001 Tamiami Trl N Ste 300

Address

Naples, FL 34103

City/State and Zip Code

bbertaccini@cyklawfirm.com

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

For further information concerning this matter, please call:

Barbara Bertaccini

Name of Person

at (239)

Area Code

298-7569

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

2014 OCT 17 PM 2:16
RECEIVED
TALLAHASSEE
DIVISION OF CORPORATIONS

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

3353BINNACLE DR 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 OCTOBER 14, 2024 and assigned
Florida document number L24000434166

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

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.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

[illegible]

2014 OCT 17
SECRET
ITALIAN

2014 OCT 17 PM 2:17
SECRET
ITALIAN

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 OCTOBER 15, 2024

Matthew Grabmyr, Authorized Rep.