

11/22/24, 4:53 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000389322 3)))



H240003893223ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : NAJMY THOMPSON, P.L.
Account Number : 120090000014
Phone : (941)907-3999
Fax Number : (941)896-4812

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

Email Address: BROBINSON@SOLECONSULTINGPARTNERS.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
205 67TH LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

2024 NOV 22 PM 1:14

FD

Electronic Filing Menu

Corporate Filing Menu

T. LEMIEUX
Help NOV 25 2024

COVER LETTER

((H24000389322 3)))

**TO: Registration Section
Division of Corporations**

SUBJECT: 205 67TH 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:

Brian Robinson

Name of Person

S.V.I. Ventures, L.L.C.

Firm/Company

11849 US HWY 41 S

Address

Gibsonton, Florida 33534

City/State and Zip Code

BROBINSON@SOLECONSULTINGPARTNERS.COM

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

For further information concerning this matter, please call:

BRIAN ROBINSON

813 450-4991

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

((H24000389322 3)))

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

(((H24000389322 3)))

205 67TH 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 11/15/2024 and assigned
Florida document number L24000482910.

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:

11849 US Hwy 41 S

(Principal office address MUST BE A STREET ADDRESS)

Gibsonton, Florida 33534

Enter new mailing address, if applicable:

11849 US Hwy 41 S

(Mailing address MAY BE A POST OFFICE BOX)

Gibsonton, Florida 33534

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

City, Florida

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

(((H24000389322 3)))

At 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

((H24000389322 3)))

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Shawn T. Kaleta	303 9th Street West Suite 2	<input type="checkbox"/> Add
		Bradenton, Florida 34205	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	XLM MANAGEMENT, L.L.C.	11849 US Hwy 41 S	<input checked="" type="checkbox"/> Add
		Gibsonton, Florida 33534	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

((H24000389322 3)))

((H24000389322 3)))

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

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 November 22 2024

- DocuSigned by:

150759Z JC7F45F

Signature of a member or authorized representative of a member

Salvatore V. Ventimiglia

Typed or printed name of signee

((H24000389322 3)))

Filing Fee: \$25.00