

L25 000 265165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

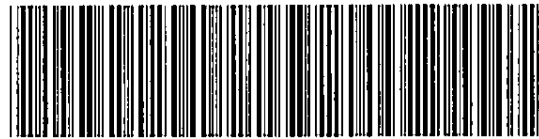
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Certified Copies _____ Certificates of Status _____

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J. HORNE
AUG 25 2025

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2025 AUG 22 PM 11:38

11:10

2025 AUG 22 PM 11:38

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-54372
(850) 524-6243

Please use funds from the account: 120210000160: \$25.00

Authorization Signature *[Signature]*

7233 Promenade Drive LLC

P25000265765

Business Name

#Document

Walk in

 Will wait

 Certified Copy of the filing

 Certificate of Status:

NEW FILINGS

 Profit
 Not for Profit
 X LLC
 Domestication
 INC
 CORP
 PLLC

AMENDMENTS

 X Amendment
 Resignation of R.A.
 Change of Registered Agent
 Revocation of Dissolution
 Conversion
 Statement of Authority
 Merger

 REVOCATION OF DISSOLUTION

OTHER FILINGS

 TRANSMITTAL LETTER
 Fictitious Name
 Statement of Authority

APOSTIL
 Other

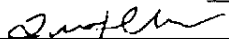
COUNTRY

REGISTRATION/QUALIFICATIONS

 -- Foreign Filing
 Partnership
 Reinstated Articles of Organization
 Statement of CORRECTION
 Domestication of a Foreign Corp_

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 7233 PROMENADE DRIVE 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:

DEREK M. JORGENSEN, ESQ.

Name of Person

SCOTT-HARRIS, ET AL

Firm/Company

4400 PGA BLVD., STE 603

Address

PALM BEACH GARDENS, FL 33410

City/State and Zip Code

DJORGENSEN@SCOTT-HARRIS.COM

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

For further information concerning this matter, please call:

DEREK M. JORGENSEN

Name of Person

at (561) 624-3900

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

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

2025 AUG 22 AM 11:33

7233 PROMENADE DRIVE 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 June 13, 2025 and assigned
Florida document number L25000265765.

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

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Michael J. Tannenholtz	187-51 Southeast Crosswinds Lane	☐ Add
		Jupiter, Florida 33478	☒ Remove
			☐ Change
AMBR	Murray (a/k/a Morris) Tannenholtz,	187-51 Southeast Crosswinds Lane,	☒ Add
	as Trustee of the	Jupiter, Florida 33478	☐ Remove
	Murray (a/k/a Morris)		☐ Change
	Tannenholtz Revocable		☐ Add
	Trust U/A dated 6/28/2000		☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

[illegible]

(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)

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.

Signature of a member or authorized representative of a member

Murray Tenenholz
Typed or printed name of signer

Filing Fee: \$25.00