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Office Use Only



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## COVER LETTER

TO:

TO: Registration Division of C	Section Corporations		
0111X 111 00°	V JUANITA PLACE, LLC	1	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Matt Norouz		
		Name of Person	
	1105 NE 5TH AVENUE.	LLC	
		Firm/Company	
	814 W. Diamond Avenue	Suite 200	
		Address	
	Gaithersburg MD 20878		
	mnorouz@boldconcepts.co	City/State and Zip Code	
		to be used for future annual report notif	fication)
For further information	on concerning this matter, please c	all:	
Matt Norouz		301 212-4193	
Nar	ne of Person	Area Code Daytim	e Telephone Number
Enclosed is a check f	or the following amount:		
■ \$25.00 Filing Fed	e S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box	on Section of Corporations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2721 NW JUANITA PLACE, LLC

21 JUH - 1 PH 1: 33

(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 09/11/2008	and assigned	
Florida document number L08000086485	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here:		
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		r the name of the new register	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		Florida Zip Code	
	•	Zip Code	
New Registered Agent's Signature, if changing Register	red Agent:		
III I and the second constitution of the second	t and a compared and in this name acity. I t	further agree to comply with:	

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 = M	lanager uthorized Member	Address 21 JUH - 1 PH 1: 3	<b>.</b> .
<u>Title</u>	Name	Address 21 1114-1 PM 1:3	3 Type of Action
MGR	David P. Wimsatt	814 W. Diamond Ave. Suite 200	<b>=</b> Add
· · · ·		Gaithersburg MD 20878	□Remove
			[]Change
AMBR	Matt Norouz	814 W. Diamond Ave. Suite 200	□Add
		Gaithersburg MD 20878	□Remove
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fan effective date is li Note: If the date in	ted, the date must be specific erted in this block does n	and cannot be prior to t meet the annlica	o date of filing or mo ble statutory filing	re man 90 days after requirements, this	date will not be list	0.0207 ( ted as t
locument's effectiv	date on the Department	of State's records.		,		
	elayed effective date, but	not an effective tin	ne, at 12:01 a.m. o	n the earlier of: (b)	The 90th day afte	er the
d is filed.						
May 14th		2021				
Dated			_·			
	116.4	1 E.	0/10	(1)		
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	Signature of	of a member or autho	rized representative	of a member		
	Signature c	of a member or autho	rized representative of	of a member		