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Account Name : EPGD ATTORNEYS AT LAW, P.A.

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48 LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 40 NW 87 AVE, LLC

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

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COVER LETTER

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eun inche.	40 NW 87			
SUBJECT:		Name of Lim	ited Liability Company	
The encloses	d Articles of	Amendment and fee(s) are sub	mitted for filing	
		ondence concerning this matter	·	
		Eric P. Gros-Dubois		
			Name of Person	
		EPGD Attorneys at Law, I	P.A.	
			Firm/Company	
		777 SW 37th Avenue, Suit	te 510	
			Address	
		Miami, FL 33135		
			City/State and Zip Code	
		eric@epgdlaw.com		
Far fumber i	n formation o	E-mail address: (concerning this matter, please o	to be used for future annual report no	tification)
Eric P. Gros		oncerning una tilatter, piease o	786 837-6787	
			or (ne Telephone Number
	Name	if Person	Area Code Daylii	nė Leiephone Numbor
Enclosed is	a check for t	he following amount:		
■ \$25.00 3	Filing Fee	S30.00 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)
	iling Addres		Street Address: Registration S	ection
Di	vision of C	Corporations	Division of Co	orporations
	D. Box 632 Habassec		The Centre of 2415 N. Monr	
	llahassee,			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

40 NW 87 AVE, LLC

(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our riability Company)	ccords.)
The Articles of Organization for this Limited Liability Company Florida document number 121000019676	were filed on 01/07/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabl	lity company here;	
40 SW 87 AVE, LLC		
The new name must be distinguishable and contain the words "Limited Liability	ty 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:		<u> </u>
(Mailing address MAY RE A POST OFFICE BOX)		A. 21
		<u> </u>
	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered office a	ddress on our records.	enter the name of the new registered
agent and/or the new registered office address here:	amendo ano amendo anol i	
Name of New Registered Agent:		:2
Maine 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 provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as a being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duti provided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

2004/005

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 = AMBR =	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Adđ
			□Remove
			Change
			□ Add
			П Rеточе
		 	□Change
			□Add
			□ Rетю∨с
			□ Change
		·	DAdd
			□Remove
			□ Change

_____ □Aċd

MINIC	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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an effe <u>ote:</u>	ve date, if other than the date of filing:
ecore is file	I specifies a detayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ited _	November 17 , 2021 .
	Signature of a moinder or authorized representative of a member
	Eric P. Gros-Dubois Typed or printed name of signer

Filing Fee: \$25.00