

L22000096587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

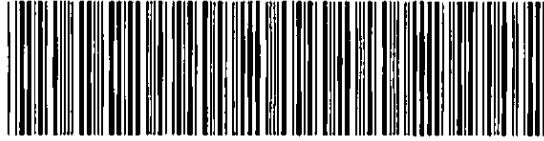
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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500385139535

FILED
2022 APR -6 AM 10:18
CLERK OF SUPERIOR COURT
SOUTH BRITAIN, MAINE

Amend

2022 APR -6 AM 11:25

APR 07 2022
ALBRITTON

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 592037 98373A
AUTHORIZATION : *Spencer*
COST LIMIT : \$ 25.00

ORDER DATE : April 5, 2022
ORDER TIME : 9:39 AM
ORDER NO. : 592037-005
CUSTOMER NO: 98373A

DOMESTIC AMENDMENT FILING

NAME: 1531 SE LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER'S INITIALS:

(10)

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

1531 SE 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 2/23/22 and assigned Florida document number L22000096587.

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)

FILED
2022 APR - 5 AM 10:18
TALLAHASSEE, FLORIDA
STATE SECRETARY

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	Hwakyoung Wittmeyer	7901 4th Street N	<input checked="" type="checkbox"/> Add
		Suite 300	<input type="checkbox"/> Remove
		St. Petersburg, FL 33702	<input type="checkbox"/> Change
AMBR	Brandon R. Wittmeyer	7901 4th Street N	<input checked="" type="checkbox"/> Add
		Suite 300	<input type="checkbox"/> Remove
		St. Petersburg, FL 33702	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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