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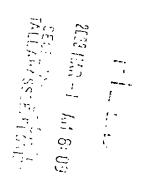
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| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nan | ne) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

| | Registration Se Division of Cor | | | • | |
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| ene ma | | AVANA 512 SW 6 AVE LLC | | | |
| SUBJEC | 1: | Name of Lim | ited Liability Company | | |
| The enclo | sed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please ret | um all correspo | ondence concerning this matter | to the following: | | |
| | | VIVIANA ARBOLEDA S | STATON | | |
| | Name of Person | | | | |
| LITTLE HAVANA 512 SW 6 AVE LLC | | | | | |
| | Firm/Company | | | | |
| | 1010 BRICKELL AVE UNIT 1607 | | | | |
| Address | | | | | |
| | | MIAMI, FL 33131 | | | |
| | | | City/State and Zip Code | | |
| | | varboleda@theevrgroup.com | m to be used for future annual report no | · Continu | |
| For furthe | er information c | oncerning this matter, please c | • | uncacon | |
| VIVIANA ARBOLEDA STATON | | 786 810-7634 | | | |
| | Name o | f Person | | me Telephone Number | |
| Enclosed | is a check for th | ne following amount: | | | |
| ■ \$25.0 | 0 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 tadditional copy is enclosed) | |
| Mailing Address: | | Street Address: | | | |
| Registration Section Division of Corporations | | • | Registration Section Division of Corporations | | |
| P.O. Box 6327 | | The Centre of | The Centre of Tallahassee | | |
| Tallahassee, FL 32314 | | 2415 N. Monr | 2415 N. Monroe Street, Suite 810 | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LITTLE HAVANA 512 SW 6 AVE 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 $\frac{11/28/2022}{1}$ and assigned Florida document number L22000499832 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 512 SW 6 AVE LLC 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

. Florida

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> | Name | Address | Type of Action |
|--------------|------|--------------|----------------|
| | | | □Add |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (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. FEBRUARY 21ST 2023 Signature of a member or authorized representative of a member VIVIANA ARBOLEDA STATON

Filing Fee: \$25.00

Typed or printed name of signee