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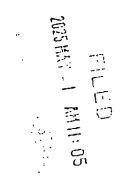
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TO:

TO: Registration So Division of Con			
26348 LIN	IESTONE SPRINGS WAY LI	.C	
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Omar Erchid	
		Name of Person	
		ERCHID LAW PLLC	
		Firm/Company	
		203 N Armenia Ave, #101	
		Address	
		Tampa, FL 33609	
	** 1=1 T = =====	City/State and Zip Code	
		omar@erchidlaw.com	····
		to be used for future annual report no	tification)
For further information of	oncerning this matter, please c	ail:	
Omar Erchid		813 631-7226 at ()	
Name o	of Person		me Telephone Number
Enclosed is a check for t	he following amount:		
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<u>Mailing Addre</u> Registration		Street Address: Registration S	ection
Division of C	Corporations	Division of Co	orporations
P.O. Box 632		The Centre of	
Tallahassee,	FL 34314	Z#10 IN. (VIOIIF	oe Street, Suite 810

Tallahassee, FL 32303

company has been notified in writing of this change.

Docusign Envelope ID: 82084E5C-D1C7-461B-8101-94C9E5C4D5E1 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

262101	IMESTONE	CDDINGC	WAVIIC

Florida document number L25000180349 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 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 limited liability company here:	and assigned		
26348 LIMESTONE SPRINGS WAY 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 April 15, 2025 Florida document number L25000180349 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 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) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:			
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	name of the new regi		
Name of New Registered Agent:			
Name of New Registered Agent:			
New Registered Office Address:			
Enter Florida street address	Enter Florida street address		
, Florida			
City			
New Registered Agent's Signature, if changing Registered Agent:	Zip Code		
I hereby accept the appointment as registered agent and agree to act in this capacity. I further a	Zip Code		

If Changing Registered Agent, Signature of New Registered Agent

Docusign Envelope ID: 82084E5C-D1C7-461B-8101-94C9E5C4D5E1 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>	Address	Type of Action
MGR SUH	SUHA ALBASHIR	29591 PICANA LN, WESLEY CHAPEL, FL 33543	} □Add
			■Remove
			□Change
MGR	SUHA SAMHOURI	29591 PICANA LN. WESLEY CHAPEL, FL 33543	3 ≣ Add
			□Remove
			Change
			□Add
			□Remove
			□Change
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If amending any other inform	ation, enter change(s) here: (Attach additional sheets, if necessary.)	
		
		
 		
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e record specifies a delayed effecti rd is filed.	ve date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t	he
Dated April 30	2025	
-	Bashar F Albashir	
	Signature of a member or authorized representative of a member	
	Bashar Albashir Typed or printed name of signee	

Filing Fee: \$25.00