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(Re	questor's Name)
(Ad	dress)
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PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE JUL 19 2022

Office Use Only



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LLAHASSEE, FI

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CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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	CERTIFIED COPY			<u> </u>
XX	РНОТОСОРУ		<u>-</u>	
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XX	FILING	LLC	AMEND	
1.	15445 PROPERTY LI			
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



15445 PROPERTY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization	on for this Limited Liability Compa	any were filed on 07/06/2022	and assigned
Florida document number_			
This amendment is submitte	ed to amend the following:		
A. If amending name, ent	ter the new name of the limited l	iability company here:	
ORIENT SUN PROPERTY	LLC		
The new name must be distingui-	shable and contain the words "Limited L	iability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal office	es address, if applicable:	<u> </u>	
(Principal office address M	<u>IUST BE A STREET ADDRESS</u>)	
		<u></u>	
Enter new mailing addres	s, if applicable:		
(Mailing address MAY BE	A POST OFFICE BOX)		
B. If amending the registe	ered agent and/or registered offic	ce address on our records, <u>enter t</u>	he name of the new registered
agent and/or the new regis	stered office address here:		
Name of New Reg	istered Agent:		
New Registered O	ffice Address:		
	 	Enter Florida street address	
		, Flor	rida
	-	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 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 Title Name Address **Type of Action** _____ □Change _____ □Add _____ □Remove ______ Change _____ Change ______ □Change ______ □Add _____ Change

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Filing Fee: \$25.00