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2022 OCT 17 PH 2: 31
SECRETARY OF STATE

COVER LETTER

TO: Registration Division of C	Section Corporations			
314 ON SUBJECT:	E BAY, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
	spondence concerning this matter			
	BARBARA RUIZ-GONZ	ALEZ		
		Name of Person		
	RUIZ-GONZALEZ LAW	, PLLC		
	-	Firm/Company		
	PO BOX 833059			
		Address		
	MIAMI, FL 33283		2027 SE	
		City/State and Zip Code	2022 OCT 17 PH 2: 3 SECRETARY OF STATEMENT ALLAHASSEE, FI	,
	barbara@ruizgonzalezław.	com		Transfer
	E-mail address:	to be used for future annual report notific	ration)	•
For further informatio	n concerning this matter, please c	all:	SEE 2	
BARBARA RUIZ-G	ONZALEZ	305 814-4224	三三二二三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三	
Nam	e of Person	at () Area Code Daytime	Telephone Number	
Enclosed is a check fo	r the following amount:			
■ \$25.00 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 (additional copy is enclosed)	
<u>Mailing Add</u> Registratio Division of		Street Address: Registration Sect Division of Corpo		
P.O. Box 6327		The Centre of Ta		

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

314 ONE BAY, 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 4, 2022 and assigned Florida document number 1.22000161367 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 "LLC" 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 reg 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

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>	Address	Type of Action
AMBR	NORTON DEVELOPMENTS LTI	455 NORTHEAST 39TH STREET	■Add
		UNIT 314	□Remove
		MIAML FL 33137	
AMBR MGR	MAX PIERRE-LOUIS	455 NORTHEAST 39TH STREET	□Add
		UNIT 314	≣Remove
			Za Carange
AMBR MGR	CATHRYN OSMAK	455 NORTHEAST 39TH STREET	200 134dd 374
		UNIT 314	₹ 1
		MIAML FL 33137	1) N 4
AMBR	AGNES PIERRE-LOUIS	430 NW 134TH STREET	□ Add
		NORTH MIAMI, FL 33168	■Remove
			□Change
AMBR	ASTRID PIERRE-LOUIS	2578 PINE STREET	□Add
		SAN FRANCISCO, CA 94115	≣Remove
			□Change
			□ Add
			□Remove
			□Change

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Effective date	: if other than the data	e of filing:	(ontional)	
(If an effective dat Note: If the da	te is listed, the date must be sate inserted in this block of	specific and cannot be prior to d	ate of filing or more than 90 days e statutory filing requirements	safter filing.) Pursuant to 60 s, this date will not be lie)5.0207 (3 sted as th
document's eff	ective date on the Depart	ment of State's records.	a manage requirement	a, this date will like of h	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
he record specific	es a delayed effective dat	e. but not an effective time	at 12:01 a.m. on the earlier of	of: (b) The 90th day aft	er the
ord is filed.	2	//	of 12.01 dam, on the currier	or. (b) The roll day at	
Dated	9/04	2000			
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Filing Fee: \$25.00

Typed or printed name of signee