L23000182563

(Re	equestor's Name)	
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COVER LETTER

TO:

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SUB IF SYP		07TH AVE HOLDINGS, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	2073 S SECT TA
		Kristina Wilson		
			Name of Person	
		KEW legal, P.A.		2023 SEP 19 6111: 54 SECRETALLAND AND AND AND AND AND AND AND AND AND
		-	Firm/Company	<u></u>
		16690 Collins Avenue Suit	1101	eri 🛨
			Address	
		Sunny Isles Beach, FL 331	60	
			City/State and Zip Code	
		Kristina@kewlegal.com		
		E-mail address: (to be used for future annual report not	ification)
For further	information c	oncerning this matter, please ca	all:	
Kristina Wi	lson		305 990-2220 at ()	
	Name o	f Person		ne Telephone Number
Enclosed is	a check for th	ne 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)
	ailing Addres		Street Address: Registration Se	ection
Registration Section Division of Corporations		Division of Co		
P.O. Box 6327		The Centre of	Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1275 NW 107TH AVE HOLDINGS, LLC		
(Name of the Limited Liabili (A Florida	ity Company as it now appears on our record a Limited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability C Florida document number <u>L23000182563</u>	Company were filed on 04/12/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC	" or the abbreviation; L.L.C."
Enter new principal offices address, if applicable:		SE SE
	DECC)	
Principal office address MUST BE A STREET ADDI	(E33)	
		1 m 1 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m
		편의 프 ········
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter</u>	the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	N .
		orida
	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>	Type of Action
MGR	David T Goldfarb	90 Alton Road Apt 3304	□ Add
		Miami Beach FL 33139	≣Remove
			Change
			□Add
			Remove
			Change 2023 SAdd F. J.
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lote: If the date inserted in this block does not meet the applicable statutory filing req	uirements, this date	will no	ot be listed
ocument's effective date on the Department of State's records.			
e record specifies a delayed effective date, but not an effective time	, at 12:01 a.m.	on the	e earlier
The 90th day after the record is filed.	`		
7,272 1			
ated			
Signature of a member or authorized representative of a			

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Filing Fee: \$25.00