20700036643

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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Office Use Only



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08/30/21--01018--002 **25.00



COVER LETTER

| TO: Re Div | gistration Sec vision of Corp | tion orations .* | • | | <i>\$</i> |
|---------------------|----------------------------------|-------------------------------------------------|---------------------------------------------------------------|----------------------|--------------------------------------------------------------------------------------------------|
| SUBJECT: | Carriage Ho | use Vehicle Storage LLC | | | , |
| 50 5 6EC1, | | Name of Lin | nited Liability Company | | |
| The enclose | d Articles of A | mendment and fee(s) are sub | omitted for filing. | | |
| Please returi | n all correspon | dence concerning this matter | to the following: | | |
| | | Joshua Forman | | | |
| | | | Name of Person | · <u> </u> | |
| | | | Firm/Company | | |
| | | 3227 Riviera Drive | | | |
| | | | Address | | |
| | | Coral Gables, FL 33134 | | | |
| | | | City/State and Zip Code | | |
| | | jbrafllc@gmail.com | | | |
| . | 2 | | to be used for future annual | report notification) | |
| ror further i | ntormation coi | ncerning this matter, please c | all: | | |
| Joshua Forn | nan | | 202 669 | 9 2299 | |
| | Name of | Person | Area Code | Daytime Teleph | ione Number |
| Enclosed is a | a check for the | following amount: | | | |
| ■ \$ 25.00 I | Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enc | | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed |
| <u>Ma</u> | iling Address: | | Street Ac | ldress: | |

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CARRIAGE HOUSE VEHICLE STORAGE LLC

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

| (A Florida Limited Li | iability Company) | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------|
| The Articles of Organization for this Limited Liability Company v. Florida document number <u>L07000036643</u> | were filed on <u>04/05/2007</u> | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabil | lity company here: | |
| The new name must be distinguishable and contain the words "Limited Liability | ty 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: | 6855 SW 68th Street | |
| (Mailing address MAY BE A POST OFFICE BOX) | Miami, FL 33143 | |
| B. If amending the registered agent and/or registered office as agent and/or the new registered office address here: Name of New Registered Agent: | ddress on our records, enter the na | |
| Now Baristand Office Address. | | |
| New Registered Office Address: | Enter Florida street address | |
| | , Florida _ | Zip Codé : |
| 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

| <u>Title</u> | Name | Address | Type of Action |
|--------------|---------------|-------------------|----------------|
| MGR | Joshua Forman | 6855 SW 81 Street | ≅Add |
| | | Miami, FL 33143 | □Remove |
| | | | □Change |
| AMBR | RADAJO, INC. | 6855 SW 81 Street | □Add |
| | | Miami, FL 33143 | |
| | | | ■ Change |
| | | | |
| | | | □Remove |
| | | | □Change |
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| | | | □ Change |

| Effective date, if other than the date of filing: [In 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records. It record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day at d is filed. Dated August 25 | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
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| d is filed. | o 605.0207 e listed as |
| Pated August 25 . 2021 | after the |
| | |
| | |
| Signature of a member or authorized representative of a member | |

Filing Fee: \$25.00