

L09000073230

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(Address)

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(City/State/Zip/Phone #)

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2022 MAR -9 AM 11:43
2022 MAR -9 AM 11:28
DEPARTMENT OF STATE
TALLAHASSEE, FL
TALLAHASSEE, FLORIDA

C. BRUMBLEY
MAR - 9 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: IVY 4405, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAROL MARIE ALDRICH HERNANDEZ

Name of Person

Firm/Company

90 SW 3 ST UNIT 4405

Address

MIAMI, FL 33130

City/State and Zip Code

rosielps@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAROL MARIE ALDRICH HERNANDEZ

407 818-5483
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

IVY 4405, 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 07/30/2009 and assigned
Florida document number L09000073230

FILED
2022 MAR -9 AM 8:43
CLERK OF STATE
TALLAHASSEE, FL

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 "L.I.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

CAROL MARIE ALDRICH HERNANDEZ

3000 NE 2ND AVE APT 1226

MIAMI, FL 33137

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

CAROL MARIE ALDRICH HERNANDEZ

90 SW 3 ST UNIT 4405

MIAMI, FL 33130

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Carol Marie ALDRICH HERNANDEZ

New Registered Office Address:

90 SW 3 ST UNIT 4405

Enter Florida street address

MIAMI

City

Florida 33130

Zip Code


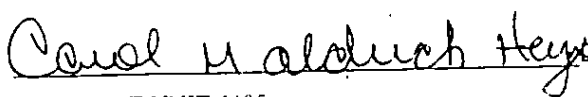
New Registered Agent's Signature, if changing Registered Agent:

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.

Carol Marie Aldrich Hernandez
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:

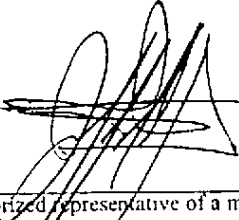
MGR = Manager
 AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	MEJIA-CHAVEZ, JOSE FRANCISCO	 90 SW 3 ST UNIT 4405 Miami, Florida 33130	<input type="checkbox"/> Add
MGR	CAROL MARIE ALDRICH HERNANDEZ	 90 SW 3 ST UNIT 4405 Miami, Florida 33130	<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: January 15, 2022 (optional)
 (If an 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 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
 (b) The 90th day after the record is filed.

Dated January 15, 2022 

Signature of a member or authorized representative of a member

JOSE FRANCISCO MEJIA-CHAVEZ

 Typed or printed name of signee