L14000027502

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CECULARY OF STATE
FALLY ASSEE, FL

C. BRUMBLEY FEB 2 4 2022

COVER LETTER

	legistration Sec Division of Corp		•	^
		42 AVENUE, LLC	· <u>'</u>	• 4
SUBJECT	r:	Name of Limi	ted Liability Company	
The enclos	sed Articles of a	Amendment and fee(s) are subt	mitted for filing.	
		ndence concerning this matter		
		Daniel Wagner, Esq.		
			Name of Person	
		Daniel Wagner, P.A.		
			Firm/Company	
		20807 Biscayne Blvd., Suit	te 201	
			Address	
		Aventura, FL 33180		
			City/State and Zip Code	
		daniel@danielwagnerlaw.co	om to be used for future annual report not	(lication)
For furthe	r information c	oncerning this matter, please co		,
	agner, Esq.		305 9197788 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	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 Addres		<u>Street Address:</u> Registration So	ection
Registration Section Division of Corporations			Division of Corporations	
P.O. Box 6327		27	The Centre of	Lallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

25005 SW 142 AVENUE, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our record liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L14000027502	were filed on 02/18/2014	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)		
		100 PEB T
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		35 M
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	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 addre	M.
	, F	lorida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, a provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is

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
MGR	ANGEL SANTOS	551 E. 60 Street	□Add
		Hialeah, FL 33013	= Remove
			□Change
			□Add
			Remove
			□Change
			🗖 Add
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Effect	ive date, if other than the date of filing:
(If an eff	ive date, if other than the date of filing:
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as lent's effective date on the Department of State's records.
	d 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
ord is fi	
Dated	02/09/22
Dated	
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00