L15000002042

(Re	questor's Name)	. .
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<u> </u>	WAIT	<u></u>
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SECRETARY OF STATE

A. BUTLER MAR - 9 2022

COVER LETTER

TO: Registration Se Division of Cor			e
	MADDOV	PLAZA, LLC	
SUBJECT:		ited Liability Company	· ·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	STE	EPHEN REAVES	
		Name of Person	
		D. 10	
		Firm/Company	
	217	SEAVIEW ST	
		Address	
	MANHATT	City/State and Zip Code EAVES 3@ GMAIL. C	266
	Coo	City/State and Zip Code	
	F-mail address: (TO be used for future annual report notific	com ation)
For further information of	oncerning this matter, please c		,
To radice anomation e	one or many promise to		
Nowa o	of Person	at ()	Telephone Number
Name o	n Person	Auca Code Dayonic	receptione (Valloci
Enclosed is a check for the	he 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 Addres		Street Address:	ion
Registration Division of C		Registration Sect Division of Corp	
P.O. Box 632	27	The Centre of Ta 2415 N. Monroe	
Tallahassee,	FL 32314	Z413 IN. IVIOIIIOC	Bucci, Built Bio

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION -OF

FILED

MADDOX	PLAZA L	LC 2022 FEB 28 AM 7: 10
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now app Limited Liability Company	ears on our records.) y) support ARY OF STATE
The Articles of Organization for this Limited Liability Co	ompany were filed on	1 6 15 and assigned
Florida document number <u>L150000020</u>	242	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company	here:
The new name must be distinguishable and contain the words "Limi	ited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>	
		-
Enter new mailing address, if applicable:	<u></u>	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on ou	r records, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter i	Florida street address
		, Florida
	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 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	REAVES CAPTURE HOLDINGS LICE	217 SERMEW ST	Ndd
		MANHATTAN BEACH, CA 90266	□Remove
			□Change
AMBR	STEPHEN PAUL REAVES	942 DUNCAN AVE	□Add
		MANHATTAN BEACH, CA 90	266 Decemove
			Change
			□Add
			□Remove
			□Change
			□Add
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f an ef Note:	ive date, if other than the date of filing: 2 22 22 (optional) fective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
e reco d is fi	rd 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 filed.
Dated	FEBRUARY 22 2022
	\(\(\lambda_{\pi}\) \(\sigma_{\pi}\)
	Stylher
	Signature of a member or authorized representative of a member