L15000093917

(R	equestor's Name)	<u>.</u>
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP		MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	lv.

f

.

•

,



04/26/21--01012--030 **25.00





, :

COVER LETTER

2

TO: **Registration Section Division of Corporations**

Avalon Business Centre, LLC

SUBJECT: _____

Name of Limited Liability Company

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

•

Please r

Please return all correspo	ondence concerning this matter	to the following:	
	Nicole Kopytko		
		Name of Person	
	Avalon Park Business Cen	tre, LLC	
		Firm/Company	
	380 Avalon Park E. Blvd	Sie 400	PPR 2
		Address	
	Orlando, FL 32828		
	<u></u>	City/State and Zip Code	
	nicolek@avalonparkgroup.c		1
	E-mail address: (to be used for future annual report notif	ication)
For further information e	oncerning this matter, please e	ill:	
Marybel Defillo		407 658-6565 at ()	
Name o	f Person		Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: **Registration Section** Division of Corporations P.O. Box 6327

Street Address: **Registration Section Division of Corporations** The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Avalon Park Business Centre, 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 December 2015 and assigned Florida document number 1.15000093917

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Avalon Innovation Center, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	

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

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	
	Enter Florida street a	. Florida
	City	_, Florida 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>	Name	Address	Type of Action
			🗆 Add
			[]Remove
			□Change
			🗆 Add
		<u> </u>	
			F⊡Remove
			G⊡Change
			□ ∧dd
			🗍 Remove
			🗆 Add
			[]Add

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

	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
	,
	··· 11
······································	
	·
······································	i i i
	11. C.
	······································

E. Effective date, if other than the date of filing: ______(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of tiling or more than 90 days after tiling.) 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.

March 19 Dated	2021
· · · · · · ·	
	Maybul Sutin
	Signature of a member or authorized representative of a member
Marybel Defillo	

Typed or printed name of signee

Filing Fee: \$25.00