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FILED 2021 NOV -1 AM 8: 57 SECRELARY OF STEE

COVER LETTER

Division of Co			<i>\$</i>
; SHRIFCT:	529 PAREI	UT LLC	, ,
3015ECT	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and feets) are sub	omitted for filing.	
	ondence concerning this matter		
. ,	······································		
	LENA	A HAT ZEN Name of Person	
		Name of Person	
	529	PARENT, LLC Firm/Company	
		Firm/Company	
	48	0 HIBISCUS 5 Address	+ #642
		Address	···
	W.PA	IM BEACH FL. City/State and Zip Code	33401
		•	
	F-mail address:	Tzen Gatt. Net to be used for future annual report notice	fication)
For further information c	concerning this matter, please c		,
LENA	KATZEN	at (<u>301</u>) <u>775, 7</u> Area Code Daytime	1408
Name o	of Person	Area Code Daytime	c Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 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	ss:	Street Address:	

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 FILED

2021 NOV -1 AM 8: 57

OL I PAREN	1, ZZZ SECRETARY OF STATE
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records, 1. AHASSEL, Hability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L/50002/12/2</u>	were filed on DEC 21, 2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilia	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	480 HIBISCUS ST
(Principal office address MUST BE A STREET ADDRESS)	# 642
17 metput office unun ein in obst that it better in obst the obst	# 642 W. PALM BEACH, FL 33401
Enter new mailing address, if applicable:	480 HIBISCUS 5+
(Mailing address MAY BE A POST OFFICE BOX)	# 642
(Mailing duaress MAT BE A POST OFFICE BOX)	480 HIBISCUS 5+ # 642 IN PALM BEACH, FL 3340.
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:	Idress on our records, <u>enter the name of the new register</u>
New Registered Office Address:	Enter 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 agre- provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is
If Chang	ing 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>	Name	<u>Address</u>	Type of Action
			□Add
			Remove
			[]Change
			□Add
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			□Remove
			Change

Effective date, if other than the date of filing: 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 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records. 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 rd is filted. Dated Out 28 1021 Xulual Main Signature of a member of authorized representative of a member						-	
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Dated Oct 28 2021 Signature of a member of authorized representative of a member	If an effective da Note: If the d document's ef e record specif	fective date on the			ne, at 12:01 a.m. or	n the earlier of: (b)	The 90th day after the
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