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SHRIECT:	23264 Hart	porview, LLC		
SUBJECT		Name of Lin	nited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	n all correspo	ondence concerning this matter	to the following:	
		Randy Besosa		
			Name of Person	
		23264 Harborview, LLC		
		•	Firm/Company	
		322 W Cannery Row Cir		,
			Address	
		Delray Beach, FL 33444		
			City/State and Zip Code	
		randy.besosa@gmail.com		
			to be used for future annual report noti:	fication) ©
For further in	nformation c	oncerning this matter, please c	alł:	
Randy Beso	sa		786 325-0965 at ()	
	Name of	f Person	Area Code Daytime	e Telephone Number
Enclosed is a	a check for th	ne following amount:		
□ \$25.00 F	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)
	iling Addres		Street Address:	
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	D. Box 632		The Centre of T	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

23264 Harborview LLC			
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears Limited Liability Company)	s on our records.)	
· ·	, , , , , , , , , , , , , , , , , , , ,		
The Articles of Organization for this Limited Liability C	company were filed on 11/3	30/2016	and assigned
Florida document number L16000217142	<u>_</u> .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ited liability company he	re:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the de	signation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			.
B. If amending the registered agent and/or registered	l office address on our re	cords, enter the name	တ of the new registered
agent and/or the new registered office address here:		<u></u>	
Name of New Projectored America			
Name of New Registered Agent:		1,1,1	
New Registered Office Address:			
	Enter Flori	da street address	
		, Florida	
 -	City		Zip Code
New Registered Agent's Signature, if changing Registered	l Agent:		

D

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 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	Elena Djakonova	322 W Cannery Row Cir, Delray Beach, FL 33444	= Add
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			Change
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record is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after tld.
	DECEMBER 22 2022
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ated _	
ated _	Signature of a member or authorized representative of a member

Filing Fee: \$25.00