Division of Corporations Electronic Filing Cover Sheet

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(((H21000388845 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PRIME ACCOUNTING & CONSULTANCY LLC

Account Number : I20180000090 Phone : (407)232-6777 Fax Number : (407)710-0533

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Help

TO:

Registration Section

COVER LETTER

(((H21000388845 3)))

Division of Co	rporations					
STRATTO	ON DEVELOPMENT LLC					
SUBJECT:		nited Liability Company				
	tvang, (ii Eli	micd blabinty Company				
The enclosed Articles of	f Amendment and fee(s) are sul	bmitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	FELIPE MARDAKIS					
Name of Person						
ASCENT ACCOUNTING GROUP						
Firm/Company						
	7345 W SAND LAKE ROAD STE 209					
		Address				
	ORLANDO, FL 32819					
	Martin 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974	City/State and Zip Code				
	INFO@ASCENTACCOU!	NTING.COM				
	E-mail address:	to be used for future annual report no	tification)			
For further information of	concerning this matter, please c	all:				
FELIPE MARDAKIS		407 232-6777				
Name of Person		at () Area Code Daytii	me Telephone Number			
		•	·, ······			
Enclosed is a check for the	he following amount:					
	-	Descar en e	7			
= \$25.00 Filing ree	☐ \$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	···	Straat & delineer				
Registration Section			Street Address; Registration Section			
Division of Corporations		Division of Co	Division of Corporations			
P.O. Box 6327			The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monro	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

DocuSign Envelope ID: 5723320D-F2B2-48E4-876B-476B683CC057

AKTICLES OF AMENDMENT (((

(((H21000388845 3)))

TO ARTICLES OF ORGANIZATION OF

STRATTON DEVELOPMENT LI	.C				
(Name of the Limi	ted Liability Compa (A Florida Limited)	iny as it now appears on our records. Liability Company))		
The Articles of Organization for this Limited L Florida document number <u>L17000008995</u>	iability Company	were filed on	and ass	signed	
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	f the limited liab	ility company here:			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.	.L.C."	
Enter new principal offices address, if applicable:		9187 BOGGY CREEK UNIT 107			
(Principal office address MUST BE A STREET ADDRESS)		ORLANDO, FL 32924			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		9187 BOGGY CREEK UNIT 107			
		ORLANDO, FL 32924			
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records, <u>enter t</u>	he name of the ner		
Name of New Registered Agent:	ASCENT ACC	OUNTING GROUP	-	2021 OCT	
New Registered Office Address:	7345 W SAND LAKE RD STE 209		<u> </u>	~ ` ' '	
		Enter Florida street address	Over Danie	LEC I	
	ORLANDO	, Flor	rida 32819 ZAGOde	<u> </u>	
New Registered Agent's Signature, if changing	Registered Agent:		707.7	 .n	
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regi	er and complete	ee to act in this capacity. I juri performance of my duties, and	ner agree to comp I I am familiar wit	oly with the th and	

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

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It almenting Authorized rerson(s) authorized to manage, enter the title, name, and address of each person-being added or removed from our records:

MGR = Manager

14077100533

AMBR = Authorized Member <u>Title</u> **Type of Action** <u>Name</u> **Address** 4660 TRIBUTE TRAIL MGR ALEXANDER STRADA ■Add KISSIMMEE, FL 34746 _____ Change MGR RYAN WENDELL 12809 BEN ROGERS COURT ■Add ORLANDO, FL 32828 ☐ Change JOSEPH GONZALEZ MGR 1048 LANDVIEW COURT ORLANDO, FL 32828 Remove ☐ Change WOLFGANG MISTELBERGER MGR 4660 TRIBUTE TRAIL _____ 🗆 🗆 Add KISSIMMEE, FL 34746 _____ 🗆 Remove □Add _____ 🗆 Remove ...___ □Add

_____ □ Remove

_____ □Change

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D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if neces	ssary.)	
			
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			_
			_
			_
			
			_
(If an effective Note: If the	ate, if other than the date of filing:	filing.) Pursuant to 60	
If the record sper record is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The Oth day an	ter the
Dated OCT	OBER 19 2021	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	FILLU 021 OCT 20 PM 1: 1
	Wolfgang Mistelberger		P
-	Signature of a member or authorized representative of a member	ORIDO	 : 5
-	WOLFGANG MISTELBERGER Typed or printed name of signee		