

L17000075553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

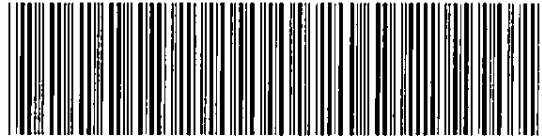
(Business Entity Name)

(Document Number)

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07/05/23--01018--023 **25.00

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DATE 07-05-23 BY 60322/UC/STP

10/11/2023



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Saint Andrews Apartments LLC
Name of Limited Liability Company

The enclosed Article(s) of Amendment and Fee(s) are submitted for filing

Please return all correspondence concerning this matter to the following

Raffi Anac
Name of Person

XP Management LLC
Limited Liability Company

5201 Riverside Blvd, Suite 115
Address

FT Lauderdale, FL 33312
City, State and Zip Code

Raffi@xp-management.com
E-mail address, (to be used for future annual report notification)

For further information concerning this matter, please call:

Raffi Anac
Name of Person

at 786 252-3042
Area Code Daytime Telephone Number

Enclosed is a check for the following amount.

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(an additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(an additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
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
OF

2023 JUL -5 AM 7:50
Sunset Andrews Apartments 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 4/4/2017 and assigned Florida document number L17000075553.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5201 Ravenswood Rd
Suite 115
Ft. Lauderdale, FL 33312

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5201 Ravenswood Rd
Suite 115
Ft. Lauderdale, FL 33312

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

Name of New Registered Agent:

XP Management LLC

New Registered Office Address:

5201 Ravenswood Rd Suite 115

Ft. Lauderdale
FL

Florida

33312
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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Anne Solutions LLC	2645 NE 2-7 St	Add
		Aventura, FL 33180	<input checked="" type="checkbox"/> Remove
			Change
MGR	XP Management LLC	5201 Ravenswood Rd.	<input checked="" type="checkbox"/> Add
		Suite 115	Remove
		FT Lauderdale, FL 33312	Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			Change

D. If amending any other information, enter change(s) here: *(attach additional sheets, if necessary)*

Multiple sets of horizontal dashed lines for amending information.

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 filing or more than 90 days after filing.) Pursuant to 69S-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 (i) _____ The 90th day after the record is filed.

Dated June 26 2023

Signature of a member or authorized representative of a member

Ball Arce
Typed or printed name of signer