L17000175413

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COVER LETTER

TO:	Registration Sec Division of Corp			
CHD ICA	Great Views	s Banyan Trail, LLC		
SOBJE	~1. <u> </u>	Name of Lim	ited Liability Company	· · ·
The encl	losed Articles of a	Amendment and fee(s) are sub	emitted for filing.	
Please re	eturn all correspon	ndence concerning this matter	to the following:	
		Melissa Orlen Cohen		
			Name of Person	
		-	Firm/Company	
		11749 Watercrest Lane		
		Boca Raton, FL 33498	Address	
		·	City/State and Zip Code	
		hopeorlen@gmail.com E-mail address: (to be used for future annual report notil	ication)
For furth	er information co	oncerning this matter, please ca	all:	
Melissa	Orlen Cohen		561 703-1782	
	Name of	Person	at ()	e Telephone Number
Enclosec	l is a check for the	e following amount:		
■ \$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 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

Great Views Banyan Trail, LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L17000175413}{L17000175413}$.	were filed on 8/16/2017 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
MEJO Investments, LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	c/o 11749 Watercerst Lane		
(Principal office address MUST BE A STREET ADDRESS)	Boca Raton, FL 33498		
Enter new mailing address, if applicable:	c/o 11749 Watercrest Lane		
(Mailing address MAY BE A POST OFFICE BOX)	Boca Raton, FL 33498		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:			
New Registered Office Address:	2022 751		
	Enter Florida street address Florida G		
	City Sip Code City		
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 Membe	r		

<u>Title</u>	Name	Address	Type of Action
			🗀 Add
			□Remove
			□ Change
			□Remove
		-	□Change
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IT 664	ive date, if other than the date of filing: $\frac{1/1/2022}{1/1/2022}$ (optional)
l an et Note:	ive date, if other than the date of filing: $1/11/2026$ (optional) fective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
e recor rd is fi	d 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 led.
Dated	Melisse H. Orla Coha
	Signature of a member or authorized representative of a member
	Melissa Orlen Cohen

Filing Fee: \$25.00