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COVER LETTER

Division of Co				
6878 LJB				
SUBJECT:		nited Liability Company		2
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		2023 stro 26
Please return all corresp	ondence concerning this matter	to the following:		_
	Marc Berenfeld			VIII 114
		Name of Person		19
	6878 LJB LLC			
		Firm/Company		-
	14700 SW 79 Avenue			
		Address		=
	Palmetto Bay, FL 33158			
	mabcpa l@comcast.net	City/State and Zip Code	-	_
	E-mail address: ((to be used for future annual report notif	ication)	
For further information	concerning this matter, please c	eall:		
Marc Berenfeld		305 796-9485		
Name	of Person	Area Code Daytime	Telephone Numbe	r
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 (additional copy is enclosed)	Certified	ate of Status &
Mailing Addre Registration		<u>Street Address:</u> Registration Sec	tion	

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

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 ST. 26 MH/H: 1

6878 LJB 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 May 23, 2018 and assigned Florida document number _____118000129397 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address _, Florida __

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.

City

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>	Type of Action
MGR	Leslie Berenfeld	14700 SW 79 Avenue	= Add
		Palmetto Bay, FL 33158	Remove
			□Add
			□Remove
			□Remove
		-	□Add
			□Remove
			Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove

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ffective date, if other than the date of filing:	(optional)
an effective date is listed, the date must be specific and cannot be prior to date tote: If the date inserted in this block does not meet the applicable st	of filing or more than 90 days after filing.) Pursuant to 605.02 atutory filing requirements, this date will not be listed:
ocument's effective date on the Department of State's records.	
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 th
is filed.	
September 22 2023	
lated September 22	
Mark	
Signature of a member or authorized r	representative of a member

Filing Fee: \$25.00