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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Al De	velopment, LLC			
JOBJECT.	Name of I	Limited Liability Company		
The enclosed Articl	es of Amendment and fee(s) are s	submitted for filing.		
Please return all cor	respondence concerning this mat	ter to the following:		
	Adam Link			
		Name of Person		
		Firm/Company		
	4707 N. 40th Street			
	Hollywood, FL 33021	Address		
	alink12@hotmail.com	City/State and Zip Code		
	<del>-</del>	s: (to be used for future annual report not	tification)	
For further informate	tion concerning this matter, pleas	e call:		
Adam Link		914 819-3856		
N	ame of Person		ne Telephone Number	
Enclosed is a check	for the following amount:			
□ \$25.00 Filing F	ee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing A</u> Registrat		<u>Street Address:</u> Registration Se	ection	
Registration Section Division of Corporations		Division of Corporations		
P.O. Box Tallahass	: 6327 see, FL 32314	The Centre of 2415 N. Monro	Tallahassee be Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION OF

Al Development, LLC		
( <u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appears on ed Limited Liability Company)	our records.)
he Articles of Organization for this Limited Liability	Company were filed on 2/22/20	and assigned
orida document number L19000052863		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lin	nited liability company here:	
ne new name must be distinguishable and contain the words "Li	mited Liability Company," the designa	ation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	·	
<ol> <li>If amending the registered agent and/or registere gent and/or the new registered office address here:</li> </ol>		ds, enter the name of the new register
gent and of the new registered vince address here.	•	
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		
	Enter Florida st	reet address
		, Florida
	City	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

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	L'Chaim Investments, LLC	4707 N. 40th Street	
		Hollywood, FL 33021	□Remove
			Change
MGR	BH 613, LLC	4707 N. 40th Street	□Add
		Hollywood. FL 33021	≣ Remove
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		□Add	
		·	Remove
		□ Change	
		<del></del>	□Add
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		1/14/2024		,		
Effective date, if other than the (If an effective date is listed, the date mu	e date of filing: ist be specific and c	annot be prior to	date of filing or mo	re than 90 days after	<b>ional)</b> er filing ) Pursuant to 604	5.0207 (3)
Note: If the date inserted in this b	lock does not me	et the applicab	le statutory filing	requirements, th	is date will not be list	ed as the
document's effective date on the I	Department of Sta	ate's records.				
he record specifies a delayed effecti	ve date, but not a	n effective time	e, at 12:01 a.m. c	n the earlier of: (	b) The 90th day after	r the
ford is filed.						
Innuary 1.1		2024				
Dated			•			
	0	7.1				
	San	<u> </u>	zed representative			
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Typed or printed name of signee