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## **COVER LETTER**

TO: Registration S Division of Co			•
	57TH AVE, LLC		
Wobster.	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	DORCAS TROCHE		
	Name of Person  RCG ACCOUNTING & ASSOCIATES, INC  Firm/Company  9000 SHERIDAN STREET SUITE 138  Address  PEMBROKE PINES, FL 33024  City/State and Zip Code DORCAS@RCGACCOUNTANTS.COM  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:		
	RCG ACCOUNTING & A	ASSOCIATES, INC	
	9000 SHERIDAN STREE		
	PEMBROKE PINES, FL		
	DORCAS@RCGACCOUN		
	E-mail address: (	to be used for future annual report notif	ication)
For further information	concerning this matter, please co	all:	
DORCAS TROCHE			
Name	of Person	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 (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 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)



4340 SW 57TH AVE, LLC

2019 5 7 27 7 11: 14

The Articles of Organization for this Limited Liability Company were filed on  $\frac{02/27/2019}{}$ \_\_\_ and assigned Florida document number 1.19000057304 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: HAMDEN, LLC 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) 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 \_\_\_\_ 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 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>	Address	Type of Action
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