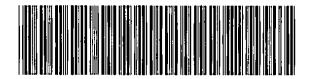
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## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
SUBJECT:FLAT	IRON 4312 LLC, a Florida li Name of Lim	mited liability company ited Liability Company	
		· · ·	
SUBJECT: FLATIRON 4312 L.L.C., a Florida limited liability Company Name of Limited Liability Company  The enclosed Articles of Amendment and feets) are submitted for filing.  Please return all correspondence concerning this matter to the following:  William H. Albornoz, Esq.  Name of Person  William H. Albornoz, P.A.  Firm/Company  901 Ponce De Leon Boulevard, Suite 204  Address  Coral Gables, Florida 33134  City/State and Zip Code  walborn@comeast.net  E-mail address: (to be used for lutture annual report nontheation)  For further information concerning this matter, please call:  William H. Albornoz, Esq.  Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  S25.00 Filing Fee  Certified Copy  calditional copy is enclosed:  Certified Copy  calditional copy is enclosed:  Certified Copy  calditional copy is enclosed:  Certified Copy			
Please return all correspo	ondence concerning this matter	to the following:	
	William H. Albornoz, Esq		
		Name of Person	
	William H. Albornoz, P.A		
	-	Firm/Company	
	901 Ponce De Leon Boule	vard, Suite 204	
		Address	
	Coral Gables, Florida 331,	34	
		City/State and Zip Code	
	-	to be used for future annual report not	tlication)
For further information e		·	
William H. Albornoz, E.	sq.	nt ( )	
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Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status &
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P.O. Box 632	7	The Centre of '	l'allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLATIRON 4312 LLC, a Florida limited liability company (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  $\frac{\text{July 31, 2019}}{\text{July 31, 2019}}$ and assigned Florida document number 1.19000185728 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 Enter new principal offices address, if applicable: N/A (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: N/A New Registered Office Address: Enter Florida street address New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

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.

N/A
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

Title	Name	Address	-	Type of Action
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	effective date, but not an effective time, at 12:01	l a.m. on the earlier of: (b) The 90th day a	fter the
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Filing Fee: \$25.00