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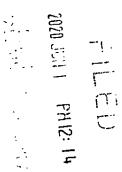
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Amend Mame chs

> JUN 1 8 2028 LALBRITTON

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	porations	$\sigma = \sigma$		
	TH ST. LLC			
SUBJECT: 4	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
	TJ CORBIN, ESQ			
		Name of Person		
	CORBIN & ASSOCIATES	S. P.A.		
Firm/Company				
	238 NE FIRST AVENUE			
		Address		
DELRAY BEACH. FL 33444				
		City/State and Zip Code		
	TJCORBIN@CORBINLAV		·	
		to be used for future annual report noti	(fication)	
For further information c	oncerning this matter, please c	all:		
TJ CORBIN		561 563-8438 at ()		
Name o	f Person	Area Code Daytim	ne Telephone Number	
Enclosed is a check for the	he 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 Addres Registration S		<u>Street Address:</u> Registration Se	ection	
Division of C		Division of Co		
P.O. Box 632	-	The Centre of T	•	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ARTICLES OF	AMENDMENT
ARTICLES OF O	RGANIZATION S
1939 NE 5TH ST, LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000226280</u>	were filed on 9/6/2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
FSJ PROPERTIES, LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3340 RIDGE LANE
(Principal office address MUST BE A STREET ADDRESS)	BOYNTON BEACH, FL 33435
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office a tent and/or the new registered office address here:	address on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	. Florida
	City Zip Code

Registered Agent's Signature, if changing Registered Agent:

by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the tions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ny has been notified in writing of this change.

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□ Remove
			☐ Change
			□Add
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			□Change
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fective date, if other than the neffective date is listed, the date must	date of filing:	ior to date of filing or n	option:	al)
ote: If the date inserted in this bl	ock does not meet the app	licable statutory filir	ig requirements, this d	ate will not be listed as
cument's effective date on the D	epartment of State's recor	ds.		
ecord specifies a delayed effective is filed.	e date, but not an effective	e time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
May 29 ted	2020			
ted		· · ·		
	Signature of a member or at	ithorized representative	e of a member	
	_	<u>.</u>		
TJ CORBIN, ESQ. as a	uthorized representative fo	or Frances Petti		
	Typed or pr	inted name of signee	·	