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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: Baron Shap	Des of Tradition LLC flimited Liability Company
The enclosed Articles of Amendment and fee(s) are	e submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Jerem	Name of Person
Jeremiah V	Baron & Co. Commercial Real Estate
49 SW 1	Flagter Ave. Suit 301 Address
	City/State and Zip Code  excon Ocan mercial realestatelle. Com  ess: (to be used for future annual report notification)
E-mail addre For further information concerning this matter, plea	
Jerim: ah Baron Name of Person	at (772) 286 - 5744 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

Baron Sh	oppes of Tradition LLC
(Name of the Limi	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited L. Florida document number <u>L19000250</u>	iability Company were filed on 10 - 24 - 2019 and assigned 6522.
This amendment is submitted to amend the foll	owing:
A. If amending name, enter the new name o	f the limited liability company here:
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:
(Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>
B. If amending the registered agent and/or ragent and/or the new registered office addres	egistered office address on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	Jeremiah Baran
New Registered Office Address:	49 SW Flagter Arc. Suit 301 Enter Horida street address
	Stuart Florida 34994
New Registered Agent's Signature, if changing R	legistered Agent:

## 3

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 Begistered 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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