# L19 000 306/64

(Re	equestor's Name)	<del></del>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	. MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

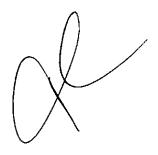
Office Use Only



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## **COVER LETTER**

Division of Co				
	346 GUAVA AVENUE	LLC		
SUBJECT:				
	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	CLAUDIA E RODRI	GUEZ		
		Name of Person		
·	N/A			
	····	Firm/Company	<del></del>	
	4309 PALM AVE			
		Address		
	WEST PALM BEACH FL	33406		
	RODRIGUEZCER.12@GN	City/State and Zip Code IAIL.COM		2024 JUL 1 1 AM
	E-mail address: (	to be used for future annual report notif	ication)	1 - ·
For further information of	oncerning this matter, please c	all:	in	- 1
CLAUDIA E RODRIGU	IEZ	561 315 6885		- F
Name o	f Person	at () Area Code Daytime	Telephone Number	3: 20
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 F Certificate of S Certified Copy (additional copy is	Status &

## Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

346 GUAVA AVENUE LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited	iny as it now appears on our re Liability Company)	ecords.)
he Articles of Organization for this Limited I. lorida document number		were filed on	and assigned
is amendment is submitted to amend the fol	lowing:		
If amending name, enter the new name o	of the limited liab	oility company here:	
57 PRESTON DR LLC			
e new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	
nter new principal offices address, if appli	cable:		2021 JU
Principal office address MUST BE A STREET ADDRESS)		N/A	
nter new mailing address, if applicable:		N/A	in H
failing address MAY BE A POST OFFICE	BOX)		
If amending the registered agent and/or tent and/or the new registered office addressed of New Registered Agent:	_	address on our records, <u>e</u>	nter the name of the new registe
New Registered Office Address:	N/A		
···		Enter Florida street a	uddress
**	N/A		, Florida
	<del></del>	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 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>	<u>Address</u>	Type of Action
	N/A	N/A	□Add
			□Remove
			☐Change
	N/A	N/A	□ <b>Ad</b> d
			Remove
	N/A	N/A	727 Add , 77
		<u> </u>	⊟Remove
	N/A	N/A	□@hange
			□Add
			Remove
	N/A		
		□ Add	
		<u> </u>	□Remove
	N/A		□Change
<del> </del>			□Add
			□ Remove
			Change

Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 615.02.  Note: If the date inserted in date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 615.02 document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12.01 a.m., on the earlier of: (b) The 90th day after the ord is filed.  OW/17/2024  Dated  Signature of a member or authorized representative of a member	N/ 	A
FILING DATE  Effective date, if other than the date of filing:		
FILING DATE  Effective date, if other than the date of filing:	_	
FILING DATE  Filective date, if other than the date of filing:		
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Note:_If the date inserted in this block does not meet the applicable statutory filing requirements; this date will not be listed a document's effective date on the Department of State's records.  The effective date on the Department of State's records.  The effective date of the earlier of: (b)  The effective day after the distribution of the earlier of: (b)  O6/17/2024  Dated	Effectiv	e date, if other than the date of filing: (optional)
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O6/17/2024 Dated	documer	nt's effective date on the Department of State's records.
O6/17/2024 Dated		
Dated	e recora rd is filea	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated		06/17/2024
Signature of a member or authorized representative of a member		··
Signature of a member or authorized representative of a member		
and the state of a memory of a determined		Signature of a member or authorized representative of a member
CLAUDIA E RODRIGUEZ		
		Typed or printed name of signee

. . . .