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(Re	questor's Name)	
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T. MATTHEWS

JAN 19 2022

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COVER LETTER

	Registration S Division of Co			
SUBJECT	#*.	DRIDGE STREET, LLC		•
SUBJECT:Na			mited Liability Company	
The enclos	sed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please retu	ırn all corresp	ondence concerning this matte	r to the following:	
		KAROLY SZEKERES		
		-	Name of Person	
		1165 ELDRIDGE STRE	ET, LLC	
			Firm/Company	
		1165 Eldridge St		
			Address	
		Clearwater FL 33755		
			City/State and Zip Code	<u>. </u>
		E-mail address:	(to be used for future annual report no	tification)
For further	information o	concerning this matter, please o	eall:	
Moreemi S	Szekeres		813 734-2134 at()	
	Name o	f Person		ne Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fee	☐ S30.00 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)
Re	ailing Addres	Section	Street Address: Registration Se	ction
Di	vision of C	orporations	Division of Cor	porations
	O. Box 632 Hahassee, F		The Centre of T	
1 41	manasce, I	L J2J14	∠415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION - - -OF

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1165	EI.	DRII	X GE	STREET	110	7

(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 02/24/2020 ____ and assigned Florida document number L20000057224 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 "L.L.C." 1165 Eldridge St Clearwater FL 33755 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1165 Eldridge St Clearwater FL 33755 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: Karoly Szekeres Name of New Registered Agent: 1165 Eldridge St New Registered Office Address: Enter Florida street address ____, Florida 33755

Zip Code Clearwater

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.

Ciry

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
AMBR	Tyler Yonge	6987 E FOWLER AVE	_
		TAMPA, FL 33617	■Remove
		·	□Change
			□Add
			☐ Change
			
			□Remove
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change

	Amending Mailing address 6412 Hanley Rd Tampa FL 33634 to 1165 Eldridge St Clearwater FL 33755
	Amending MGR address 6412 Hanley Rd Tampa FL 33634 to 1165 Eldridge St Clearwater FL 33755
	Remove L. Tyler Yonge at Registered agent and add Karoly Szekeres 1165 Eldridge St Clearwater FL 33755
	
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ect	tive date, if other than the date of filing:(optional)
ef e:	Rective 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 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
oi fi	rd 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 fled.
ed	January 0.3 2022
	Signature of a member or authorized representative of a member
	Signature of a mosmoer of authorized representative 61 a member
	Karoly Szekeres
	Typed or printed name of signee

Filing Fee: \$25.00