## 120000 108577

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JUN - 9 2020

## **COVER LETTER**

TO: Registration S Division of Co				
XEN FIV	E, LLC			
SUBJECT:	Name of Lin	nited Liability Company	<u>.                                    </u>	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	oondence concerning this matter	to the following:		
	CRAIG B. HILL			
		Name of Person		
	PETERSON & MYERS, I	P.A.		
		Firm/Company		
	225 E. LEMON ST., SUIT	°E 300		
	· · · · · · · · · · · · · · · · · · ·	Address		
	LAKELAND, FL 33801			
		City/State and Zip Code		
	CHILL@PETERSONMYF	RS.COM to be used for future annual report not	itication)	
For further information	concerning this matter, please e	•	incation)	
CRAIG B. HILL		863 683-6511		
Name	of Person		ne Telephone Number	
Enclosed is a check for	the 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 Address: Registration Section		Street Address: Registration Se	ection	
Division of Corporations		Division of Co.	Division of Corporations	
P.O. Box 63 Tallahassee,		The Centre of 2415 N. Monre	Fallahassee oc Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 11 20 PH 4: 22

XEN FIVE, LLC			20 111 4-2
(Name of the Lim	ited Liability Company a (A Florida Limited Liabi	s it now appears on our records.) lity Company)	
The Articles of Organization for this Limited I Florida document number L20000108577		re filed on APRIL 21, 2020	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability	company here:	
The new name must be distinguishable and contain the	words "Limited Liability C	Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u> </u>		·
B. If amending the registered agent and/or agent and/or the new registered office addre		ess on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	CRAIG B. HILL	**;···	
New Registered Office Address:	225 E. LEMON ST.	, SUITE 300  Enter Florida street address	
	LAKELAND	, Floric	ia 33801

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	ANUPAM SAXENA	145 15TH STREET NE, UNIT 633	🗆 Add
		ATLANTA, GA 30309	□Remove
			= Change
			🗆 Add
			□Remove
		<del></del>	🗆 Change
			□Add
			□Remove
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ote:	ve date, if other than the date of filing:
recore	I 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 ed.
ated	May 19
	Signature of a member or authorized representative of a member
	Signature of a memoer or authorized representative of a memoer

Filing Fee: \$25.00