# L20000121516

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

# bartonshaw66 LLC

(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 <u>05/05/2020</u> and assigned Florida document number <u>L20000121516</u>.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

This amendment is submitted to amend the following:

$\mathbf{A}$ .	lf amending name.	enter the new	<u>name of the limited</u>	<u>liability company here:</u>
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Enter new principal offices address, if applica	able: 300 69th St. U	nit 6 💆 📜
(Principal office address MUST BE A STREE	Miami Beach,	FL 33141
		o (3)
		<b>1</b> (5)
Enter new mailing address, if applicable:	300 69th St. U	nit 6 💆 🏥
(Mailing address MAY BE A POST OFFICE )	Miami Beach,	FL 33141
B. If amending the registered agent and/or reagent and/or the new registered office addres  Name of New Registered Agent:	egistered office address on our records, <u>enter the</u> s <u>here</u> :	name of the new registered
Name of New Registered Agent:		name of the new registered
agent and/or the new registered office addres	s here:	name of the new registered
Name of New Registered Agent:	300 69th St. Unit 6	221.41

## 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.

## **COVER LETTER**

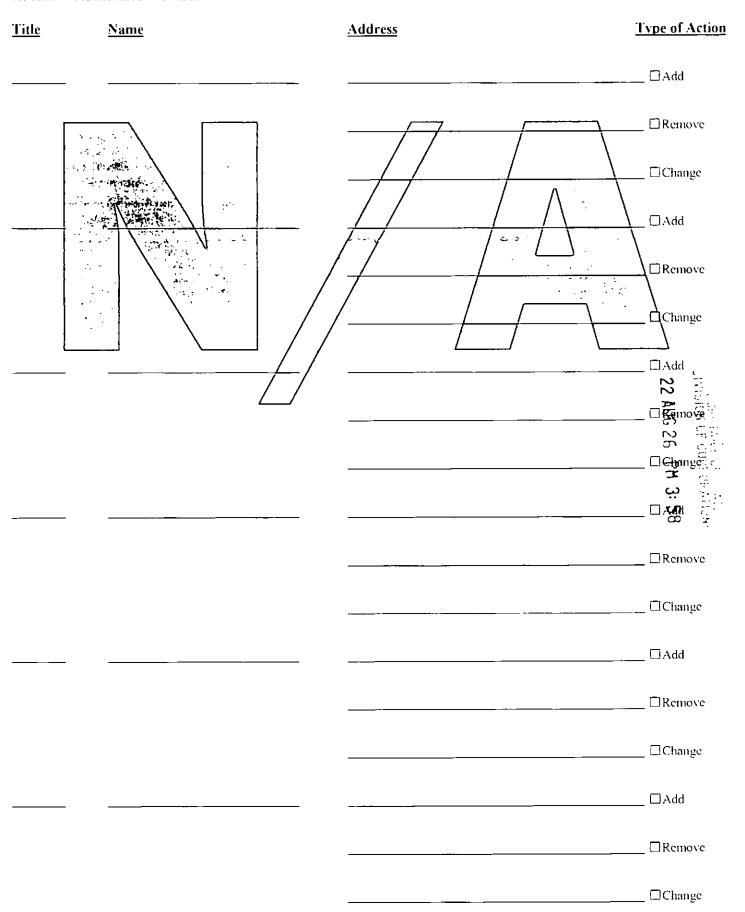
supercr. <b>ba</b>	rtonshaw66	LLC			
SUBJECT:		ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:	;		
	22 AUG 26				
		Name of Person			
	bartonsh	PM 4:			
		Firm/Company			
	<b>8</b> (#				
	<del></del>				
	Miami Be	ach, FL 3314:	1		
		City/State and Zip Code  W66@gmail.e			
	E-mail address: (	to be used for future annual report no	otification)		
For further information c	oncerning this matter, please c	all:			
Anthony	Bethlen	at ( <b>305</b> ) <b>515</b>	0177		
Name of Person		Area Code Dayı	ime Telephone Number		
Enclosed is a check for th	ne following amount:				
EX25.00 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 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

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



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Filing Fee: \$25.00