_ <u></u>
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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TALLAHASSEE, FL 32309 (850) 524-54372 (850) 524-6243 Please use funds from the account | 120210000160: \$25.00 Authorization Signature 4205 E Miller LLC #Document 6-2000264301 Business Walk in Will wait Certified Copies of articles Certificate of Status <u>NEW FILINGS</u> <u>AMENDMENTS</u> __ Profit X Amendment ._ ._ Not for Profit _____Resignation of R.A. _LLC ____ Change of Registered Agent Revocation of Dissolution _ Domestication ____ Conversion INC _ Statement of Authority CORP OTHER Merger Restated Articles **OTHER FILINGS** REGISTRATION/QUALIFICATIONS TRANSMITTAL LETTER ___ Foreign Filing Partnership ____Reinstatement Fictitious Name Statement of CORRECTION _ Statement of Authority Domestication of a Foreign Corp. APOSTIL COUNTRY Other

FLORIDA CAPITAL COURIER SERVICES, INC

EXAMINER'S INITIALS:

2330 CLARE DRIVE

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-54372 (850) 524-6243

Please use funds from the account Authorization Signature	120210000160: \$25.00
4205 E Miller LLC Business	#Document L 2000 0 264 301
Walk in	Will wait
Certified Copies of articles Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit LLC Domestication NC CORP OTHER	X AmendmentResignation of R.A Change of Registered Agent Revocation of Dissolution Conversion Statement of Authority Merger Restated Articles
OTHER FILINGS	REGISTRATION/QUALIFICATIONS
TRANSMITTAL LETTER	Foreign Filing
_Fictitious Name	Partnership Reinstatement Statement of CORRECTION
Statement of Authority	
_ APOSTIL	Domestication of a Foreign Corp.
COUNTRY	Other
EV AMINED'S INTTIALS.	

COVER LETTER

TO: Registration Se Division of Cor			
4205 E MIL	LER LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter (to the following:	
	YODELKIS BARBOSA		
		Name of Person	
	WORTHSHIRE GROUP		
		Firm/Company	
	1507 E NORTH BAY ST		
		Address	
	TAMPA, FL, 33610		
		City/State and Zip Code	
	JAY@WORTHSHIREGR	OUP.COM to be used for future annual report not	Heatin
r r de la ciada accidance			
For further information c	oncerning this matter, please or		
YODELKIS BARBOSA		813 403-7965 at ()	
Name o	f Person	Area Code Dayrin	ю Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	[2] \$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		Street Address:	which
Registration Section Division of Corporations		Registration Sc Division of Co	
P.O. Box 632		The Centre of	•

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2025 FEB - 7 PM 12: 11

4205 E MILLER 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 I Florida document number L20000264301		were filed on 08/25/2020	and assigned
This amendment is submitted to amend the fol			
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		400 Golf Brook Circle	
		Apt 204	
Timelpar office matress most the history	12.1.71177771121117		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Apt 204	
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office <u>ess bere</u> :		
Name of New Registered Agent:	Patricia Ann N	Marrero	
New Registered Office Address:	400 Golf Brook Circle		
New Registered Office Address.		Enter Florida street ac	ldvess
	Longwood		, Florida <u>32779</u> Zip Code
		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.

Thanging 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 or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Patricia Ann Marrero	400 Golf Brook Circle	
		Apt 204	l IRemove
		Longwood, FL 32779	
MGR Worthshire Group LLC	116 N Dale Mabry Hwy	115.11	
		Tampa, FL, 33607	(=) (, , , , , , , , , , , , , , , , , ,
			i 1Change
MGR Aviles Venture Group LLC	1802 N Howard Avenue	[]]Add	
	Tampa, FL 33607		
		[]Change	
			[]Add
			ElRemove
		LiChange	
			F1Add
			FiRensove
			l]Change
			LIAdd
		ClRemove	
			() Change

). If amei	ading any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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Effortiv	re date, if other than the date of filing:
(If an effective Note: 1	tive date is listed, the date must be specific and cannot be prior to date of fifing or more than 90 days after filing.) Poissont to 605,0207 (3 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that's effective date on the Department of State's records.
he record ord is file	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 _	anuary 5th 2025
	Signature of a manuer or approximation of a member
	Yodelkis Barbosa
	Typed or printed name of signee