Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-8600 Fax Number : (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	·	٠,
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SIX AND PARK LLC

Certificate of Status	0
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10/26/2020 MON 10:56 PAX

**⊘**004/006

## **COVER LETTER**

TO: Registration Se Division of Con	etion porations		
	PARK LLC	•	
SUBJECT:	Name of Limi	tred L:ability Company	
	Amendment and fee(s) are sub-		
	Cheyenne Moseley		
		Name of Person	<del></del>
	Legalzoom.com, Inc.		
		Firm/Company	<del></del>
	101 N Brand Blvd 11th Fl		
		Address	
	Glendale, CA 91203		
		City/State and Zip Code	
	tiffanywalter37@gmail.com	to be used for future annual report notiff	nution)
			CAROTT)
For further information of	oncerning this matter, please or	aji.	
Cheyenne Moseley		800 773-0888 at ( )	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

10/26/2020 MON 10:56 PAX

2003/006

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

SIX AND PARK LLC			
(Name of the Limited Liability (A Florida	iv Симовлу as it now appe i Limited Liability Company	ars on our records.)	<del></del>
The Articles of Organization for this Limited Liability C. Florida document number L20000290974	ompany were filed on (	09/16/2020	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company	here:	
SIXTH AND PARK LLC			
The new name must be distinguishable and contain the words "Limit	ited Lizbility Company," the	designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	ESS)		
	<del>,,</del>		
Euter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	75	B
			3
	-	70	
B. If amending the registered agent and/or regist	ered office address o	n our records, enteret	e name of the her
registered agent and/or the new registered office addr	ess nere:	.م. ابا	9 E O
		-	\$ 6
Name of New Registered Agent:			2 <u>3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 </u>
New Registered Office Address:	_ <b>_</b>		P*
	Enter Flo	orida street address	
<del></del>	·	, Florida	<del></del>
	City		Zip Code
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ago being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance o ent as provided for in	f my duties, and I am fan Chapter 605, F.S. Or. if	ntliar with and this document is
	If Changing Registered A	gent, Signature of New Regis	tered Agent

\_ Change

To: Page 5 of 6.

10/26/2020 MON 10:57 PAX

**2**005/006

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 Title Name Address Type of Action \_\_□ Add \_\_ 🗆 Remove \_\_\_\_\_ Change \_□ Λdd \_\_□ Remove \_\_ Change \_\_□ Add \_\_□ Remove \_\_\_\_ Change \_□ Remove \_ D Change \_□ Remove ☐ Change \_□ Add \_□ Remove

'am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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		<del></del>
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ffec	tive date, if other than the date of filing: (optional)	504 0007 (3
an el ote:	tive date, if other than the date of filing:	to 603.0207 (3 be listed as th
ocur	nent's effective date on the Department of State's records.	
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the	earlier of:
) ne	e 90th day after the record is filed.	
	And don't be and	
ated	<u>Ortober 26</u> . <u>2020</u> .	
	1 April mil holter	
	Signature of a member of authorized representative of a member	_
	Tiffany M Walter	

Page 3 of 3

Filing Fee: \$25.00