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| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE TALL AND STREET AND STREET STATE

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COVER LETTER

| | Registratio Division of | n Section Corporations | |
|-----------------------|----------------------------|---|---|
| | | TOWNHOUSE, LLC | |
| SUBJEG | :'r: <u> </u> | Name of Lin | nited Liability Company |
| The encl | osed Article | s of Amendment and fee(s) are sul | bmitted for filing. |
| Please re | turn all corr | espondence concerning this matter | to the following: |
| | | Suhail Rivera | |
| | | | Name of Person |
| | | | Firm/Company |
| 15566 SW 13th Terrace | | | |
| | | | Address |
| | | Miami, FL 33194 | |
| | | | City/State and Zip Code |
| | | alkalinevegannews@gmai | |
| For furth | er informati | on concerning this matter, please | (to be used for future annual report notification) |
| Suhail R | ivera | | 786 449-5940 at () |
| | Nai | me of Person | Area Code Daytime Telephone Number |
| Enclosed | is a check f | or the following amount: | |
| ≡ \$25.0 | 00 Filing Fe | e \(\subseteq \\$30.00 \) Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Ad Rogistration | | Street Address: Registration Section |
| | | on Section of Corporations | Division of Corporations |
| | P.O. Box | | The Centre of Tallahassee |
| • | Fallahasse | ce, FL 32314 | 2415 N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| 14519 TOWNHOUSE, LLC | | |
|---|---|------------------------------|
| (Name of the Limited Liability C (A Florida Lin | ompany as it now appears on our records.) nited Liability Company) | |
| The Articles of Organization for this Limited Liability Comp | pany were filed on 10/15/2020 | and assigned |
| Florida document number L20000326464 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited | liability company here: | |
| 14519 Tiger, LLC | | |
| The new name must be distinguishable and contain the words "Limited | Liability Company," the designation "LLC" or | the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRES | <u></u> | |
| | | 022 |
| | - | 022 DEI |
| Enter new mailing address, if applicable: | | |
| | | ω ⁻ |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| | | - 5 - |
| B. If amending the registered agent and/or registered of agent and/or the new registered office address here: | fice address on our records, <u>enter the</u> | e name of the new registered |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | _ |
| | . Florie | da |
| | 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.

If Changing Registered Agent, Signature of New Registered Agent

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> | Name | Address | Type of Action |
|--|----------------------|----------------------|----------------|
| MGR | Alkaline Holding LLC | 2423 SW 147 Ave #102 | ≣ Add |
| | | Miami, FL 33185 | □Remove |
| | | | □Change |
| MGR | Rivera, Suhail | 2423 SW 147 Ave #102 | 🗆 Add |
| | | Miami, FL 33185 | Remove |
| | | | ☐ Change |
| | | | □Add |
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| Effective date, if other than the date of filing: [If an effective 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record 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 ord is filed. Dated 12-5-22 Selignature of a member or authorized regresentative of a member Subail Rivera | | |
|--|---|------------------------------------|
| Effective date, if other than the date of filing: (optional) If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days other filing.) Pursuant to 605.0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. He record 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 ord is filed. Dated 12-5-22 Signature of a member or authorized representative of a member | | |
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| C. hail Divarra | Signature of a member or authorized representative of a member | - |
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Filing Fee: \$25.00