L20000327636

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only 5. C. O8/26/24



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COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	4163 42nd	Ave S LLC		
		ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	White	Name of Person		
	4163 4	and Aut 5 LL(Firm/Company		
	620	whitney are		
	Lanto	City State and Zip Code COUNTY COUNTY COME TO SHOW COME	nel	
For further information	NOWN AND C	to be used for future annual report not)	
Whitney	Dancy of Person	at (SO) 71do - 6 Area Code Daytin	2579 ne Telephone Number	Œ
Enclosed is a check for t	the following amount:			<i>:</i>
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy. (additional copy is enclosed)	
			$\hat{\gamma}$	
Mailing Addre Registration Division of O	Section Corporations	Street Address: Registration Se Division of Co	rporations	
P.O. Box 63	77	The Centre of "	l'allahaccee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4163 42nd Ave 5 L		
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	w appears on our records.) empany)	
The Articles of Organization for this Limited Liability Company were file	d on 10/15/2020	and assigned
Florida document number <u>L20003371436</u> .	. 1	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability comp	<u>pany here</u> :	
The new name must be distinguishable and contain the words "Limited Liability Compar	py," the designation "LLC" or the abt	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	,	
B. If amending the registered agent and/or registered office address of agent and/or the new registered office address here:	n our records, enter the name	of the new registered
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		<u></u>
E	inter Florida street address	Zip Code.
		<u> </u>
Ciţ		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 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>	<u>Name</u>	Address	Type of Action
AMBR	Whitney Allmon ->	Whitney Danca	🗀 Add
	(married)	620 Whitney Avenue	□Remove
		Lantana, Ft. 33462	\(\overline{\text{Change}} \)
			🗆 Add
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fective date	, if other than the date o	of filing:	(option		
an effective dat ote: If the da	e is listed, the date must be spec	cific and cannot be prior to date of ess not meet the applicable statu	filing or more than 90 days after f	iling.) Pursuant to 605.0	
ecord specificity is filed.	es a delayed effective date,	but not an effective time, at 12	:01 a.m. on the earlier of: (b)	The 90th day after t	the
ited	8/10	<u>802</u> }			
	Signatu	re of a member or authorized repr	esentative of a member		
		Daymon Allmon Typed or printed name of			
		Daymon & Allmon			